MAX

CENTERS FOR MEDICARE & MEDICAID SERVICES

The Medicaid Analytic eXtract Chartbook

2007

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Ch. 3 State Level

Ch. 4 Managed Care

Ch. 5 Duals

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The Medicaid Analytic eXtract Chartbook

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Office of Research, Development, and Information

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1. Introduction

The Medicaid Analytic eXtract (MAX) is a data system derived from the Medicaid Statistical Information System (MSIS) that contains extensive information about Medicaid enrollees and the Medicaid health services they use during a calendar year. This chartbook is primarily based on the 2002 MAX data and presents an overview of enrollee demographic and enrollment characteristics, service utilization, and expenditures at the national and state levels in 2002. The Centers for Medicare & Medicaid Services (CMS), the producer of both MAX and MSIS, has developed this chartbook to serve as a resource to state Medicaid administrators, policymakers, researchers, and others interested in the Medicaid program and the people it serves.

This introduction provides an overview of the Medicaid program and the MAX data system. The remaining chapters of the chartbook present figures and tables that reflect the Medicaid population in 2002: Chapter 2 provides a national profile of Medicaid enrollees and their Medicaid experience, Chapter 3 presents state-level statistics, and Chapters 4 through 6 provide supplemental information on special topic areas (managed care, dual Medicare/Medicaid enrollees, and service use and expenditure information by detailed service type, respectively). The chartbook concludes with a glossary and list of references. A separate appendix contains the source data tables used to construct the materials presented in this chartbook.

The Medicaid Program in 2002

Medicaid is a means-tested entitlement program that provides health care coverage to many of the most vulnerable populations in the United States, including low-income children and their parents and the aged and disabled poor. The program was enacted along with Medicare in 1965 by Title XIX of the Social Security Act. Medicaid has since grown to become the third largest source of health care spending in the U.S. after Medicare and employer-provided health insurance. Since the 1990s, the number of persons served by Medicaid has exceeded the number enrolled in Medicare.

In 2002, Medicaid covered over 50 million persons, providing health insurance coverage to over 18 percent of the U.S. population and accounting for approximately 15 percent of total U.S. health expenditures. Medicaid is the largest insurer for nursing home care in the nation, covering almost 45 percent of nursing home costs in 2002 (CMS 2006).

Medicaid is administered by states under general guidelines established by the federal government and is financed jointly by federal and state funds. The federal match rate, called the Federal Medical Assistance Percentage (FMAP), differs in each state and is calculated by taking into account the average per capita income in a given state in relation to the

national average. In fiscal year 2002, the FMAP ranged from 50 percent in 11 higher-income states to 76 percent in Mississippi.

To receive federal matching funds, a state's Medicaid program must cover basic health services for all individuals in certain mandatory Medicaid eligibility groups:[1]

- *Low-income children:* all children under age 6 with family income at or below 133 percent of the federal poverty level that satisfy certain asset requirements are eligible for Medicaid. Children between age 6 and 19 in families at or below 100 percent of the poverty level (satisfying similar asset requirements) are also eligible if they were born after September 30, 1983.

- *Pregnant women:* pregnant women with family income at or below 133 percent of the poverty level that satisfy certain asset requirements remain eligible from the time they become pregnant through the month of the 60th day after delivery, regardless of change in family income.

- *Infants born to Medicaid eligible pregnant women:* all infants under age one are eligible if their mother resides in the same household and was eligible for Medicaid at the time of birth.

- *Limited-income families with dependent children:* people who meet the state's Aid to Families with Dependent Children (AFDC) requirements effective on July 16, 1996, are eligible for Medicaid.

- *Supplemental Security Income (SSI) recipients:* with the exception of some individuals living in Section 209(b) states, aged and disabled people receiving SSI are eligible for Medicaid.[2]

- *Medicare beneficiaries:* most aged and disabled low-income Medicare beneficiaries are eligible for Medicaid. Those with income below 100 percent of poverty and assets below 200 percent of SSI asset limits are known as Qualified Medicare Beneficiaries (QMB) and receive Medicare premiums and cost-sharing payments. Medicare beneficiaries with income between 100 percent and 120 percent of the poverty level are known as Specified Low-Income Medicare Beneficiaries (SLMBs), and those with income between 120 percent and 135 percent are known as Qualifying Individuals 1 (QI1s). SLMBs and QI1s qualify for assistance with Medicare premiums, but not cost sharing. (The vast majority of QMBs and some SLMBs also qualify for full Medicaid benefits.)

- *Other:* several other specified groups are mandatorily eligible for Medicaid benefits. For further detail, see Schneider et al. (2002).

Generally, Medicaid is mandated to cover those who have low incomes and few resources and are aged, disabled, children, pregnant women, or adults with dependent children. For these groups, Medicaid must cover all "mandatory services," which include but are not limited to inpatient and outpatient hospital services, physician services, laboratory and X-ray services, family planning services, early and periodic screening for those under age 21, and nursing facility services.

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[1] Medicaid has historically been linked to welfare receipt. Although the tie between welfare and Medicaid for children and their parents was severed in 1996 under the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), some of the mandatory eligibility groups still reflect this history.

[2] Section 209(b) states are states that elected to use more restrictive eligibility requirements than those of the SSI program, but these requirements cannot be more restrictive than those in place in the state's Medicaid plan as of January 1, 1972. Section 209(b) states include Connecticut, Illinois, Minnesota, New Hampshire, Ohio, Virginia, Hawaii, Indiana, Missouri, North Dakota, and Oklahoma.

Table 1.1

Optional Services Covered by State Medicaid Programs in 2002

	2002 FMAP	Institutional Long-Term Care				Other Types of Services																	
		Inpatient Psychiatric (Under Age 21)	Intermediate Care Facility for Mentally Retarded	Institution for Mental Disease (65 and Older)	Nursing Facility (Under Age 21)	Dental	Dentures	Home Health–Audiology	Home Health–Occupational Therapy	Home Health–Physical Therapy	Home Health–Speech and Language Therapy	Hospice	Mental Health Rehabilitation/Stabilization	Personal Care	Physician Directed Clinic Services	Prescription Drugs	Primary Care Case Management	Private Duty Nursing	Religious (Non-Medical) Health Care Institution	Speech, Hearing, and Language Disorder Therapy	Targeted Case Management	Transportation (Not Administrative)
Alabama	70.45	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●		●		●	●	●
Alaska	57.38	○	○	○	○	○		○	○	○	○	○	○	○	○	○	●			○	○	○
Arizona	64.98	●	●	●	●	●	●		○	○	○	○	●	○	●	●		○	●	●	○	●
Arkansas	72.64	●	○		○	●	●		●	●	●	●	●	○	●	●	●	●		●	●	●
California	51.40	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●			●	●	●	●
Colorado	50.00	●	●	●	●			●	●	●	●	●	●		●	●	●	●		●	●	●
Connecticut	50.00	●	●	●	●	●	●	●	●	●	●				●	●				●	●	●
Delaware	50.00		○	○	○			○		○	○	○	○	○	○	○		○				
Dist. of Columbia	70.00	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●		●		●	●	●
Florida	56.43	○	○	○	○	●	●	●	●	●	●	●	●	●	●	●		●		●	○	○
Georgia	59.00		●		●	●	●	●	●	●	●	●	●		●	●	●	○		●	○	●
Hawaii	56.34	●	●	●	●	●	●	●	●	●	●	●			●	●				●	●	●
Idaho	71.02	○	○	●	○	○	○	○	○	○	○	○		○	○	○	○			○	○	○
Illinois	50.00	●	●	●	●	●	●	●	●	●	●	●	●		●	●			●	●	●	●
Indiana	62.04	○	○	○	○	○	○	○	○	○	○	○	○		○	○		○	○	○	●	○
Iowa	62.86	○	●	○	○	●	●	●	●	●	●	●	●		●	●	●			●	●	○
Kansas	60.20	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●			●	●	●
Kentucky	69.94	○	●	○	●	●		●	●	●	●	●			●	●				●	●	●
Louisiana	70.30	○	●	○	●		○		●	●	●	●			●	●					●	●
Maine	66.58	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
Maryland	50.00	●	●	●	●	●		●	●	●	●	●	●	●	●	●		●		●	●	●
Massachusetts	50.00	●	○	●	●	●	●	●	●	●	●	●		●	●	●	●	●		●	●	●
Michigan	56.26	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●		●	●		●	●
Minnesota	50.00	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●		●	●	●	●	●
Mississippi	76.09	●	●		●	●		●	●	●	●	●	●		●	●	●			●	●	●
Missouri	61.06	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○				○	
Montana	72.83	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●		●	●	●
Nebraska	59.55	●	●	●	●	●	●	●	●	●	●		●	●	●	●	●	●		●	●	●
Nevada	50.00	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●		●		●	●	●
New Hampshire	50.00	●	●	●	●	●		●	●	●	●		●	●	●	●		●		●	●	●
New Jersey	50.00	○	○	○	○	●	●	●	●	●	●	○	●	○	●	●			○	●	○	●
New Mexico	73.04	●	●			●	●	●	●	●	●	●	●	●	●	●				●	●	●
New York	50.00	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●		●	●	●
North Carolina	61.46	●	●	●	●	●	●	●	●	●	●		●	●	●	●	●	●		●	●	●
North Dakota	69.87	●	●	○	●	●	●	●	●	●	●	●	●	●	●	●	●	●		●	●	●
Ohio	58.78	●	●	●	●	●	●	●	●	●	●	●	●		●	●		●	●	●	●	●
Oklahoma	70.43	●	○	○	●	●							●	●	●	●	○				○	
Oregon	59.20	○	○	●	●	●	●	●	●	●	●	●	●	●		●		○		●	●	●
Pennsylvania	54.65	●	●	●	●	●	●	●	●	●	●	●	●	●	●	○	●	●	●	●	●	●
Rhode Island	52.45	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●					●	●
South Carolina	69.34	●	●		●	●		●	●	●	●	●			●	●					●	●
South Dakota	65.93		●	●	●	●	●	●	●	●	●	●	●	●	●	●	●			●	●	●
Tennessee	63.64	●	●	●	○	●	●	●	●	●	●	●	●		●	●	●	○		○	●	○
Texas	60.17		●		●				●	●		●	●	●	●	●			●		●	●
Utah	70.00	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●		●		●	●	●
Vermont	63.06		○		○	○	○	●	●	●	●	●	●	○	●	●		●		●	○	○
Virginia	51.45		●	○	●	●		●	●	●	●	●	●		●	●	●		●	●	●	●
Washington	50.37	●	●	●	●	●	●	●	●	●	●	●	●	○	●	●		●		○	○	●
West Virginia	75.27	●	●		●	●		●	●	●	●	●	●	●	●	●	●	●		●	●	●
Wisconsin	58.57	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●		●	●	●	●	●
Wyoming	61.97		●	●	●	●			●	●	●	●	●		●	●				●	●	●

● covers all eligible groups in state ○ covers some eligible groups in state (blank) covers no eligible groups in state

Source: Centers for Medicare & Medicaid Services, "Medicaid-at-a-Glance 2002."

States have the flexibility to provide optional coverage to certain individuals who do not meet the income and resource thresholds set by the federal government for mandatory coverage:

- *Medically needy:* states may provide coverage to "medically needy" individuals—those who have incurred sufficiently high medical costs to bring their net income below a state-determined level.
- *Pregnant women:* states can cover pregnant women at a higher income threshold than set for mandatory coverage.
- *Children, including Medicaid expansion SCHIP children:* states can cover children at a higher income threshold than set for mandatory coverage. The enactment of the State Children's Health Insurance Program (SCHIP) in 1997 provided enhanced funding for states to expand Medicaid coverage for children up to 250 percent of poverty (or higher in some circumstances).[3]
- *Institutionalized aged and disabled:* states can cover aged and disabled persons in nursing homes and other institutions at a higher income threshold, up to 300 percent of the SSI standard.
- *Participants in 1115 waiver demonstrations:* states can apply for demonstration waivers enabled under Section 1115 of the Social Security Act to extend Medicaid coverage to groups that would not otherwise be covered, such as childless adults or higher income adults who are parents.[4]

For further detail on other optionally eligible groups, see Schneider et al. (2002).

States may also choose to cover certain services, such as dental care or prescription drugs, that are not required by federal mandate. As a result, the Medicaid program varies greatly between states. Table 1.1 shows variation in the types of select optional services that were covered by each state's Medicaid program in 2002 and the enrollees who were eligible for these services. All states covered several key optional services, such as prescription drugs and intermediate care facility services for the mentally retarded.[5]

State variation in Medicaid coverage, both with regard to eligibility groups and the services that are covered, can result in differences in enrollment rates and expenditures between states. Other factors —including the age distribution, the rate of poverty, and the rate of Medicaid reimbursement to providers within a state—can also contribute to variation among states in enrollment, service use, and costs. These differences should be kept in mind when interpreting the national- and state-level statistics presented in this chartbook. It should also be kept in mind that this chartbook reflects the Medicaid program and legislative environment in 2002, before the enactment of the Medicare Prescription Drug Improvement and Modernization Act of 2003 and the Deficit Reduction Act of 2005.

The Medicaid Analytic eXtract (MAX)

The MAX data system contains extensive information on the characteristics of Medicaid enrollees and the services they use during a calendar year. MAX contains individual-level information regarding age, race and ethnicity, monthly enrollment status, eligibility group, and use and costs of services during the year. MAX also includes claims-level records that

[3] States also have the option to establish separate SCHIP programs for children.

[4] Section 1115 waivers are also used to waive certain statutory and regulatory Medicaid provisions for research purposes and Medicaid demonstration projects.

[5] For further detail about state provision of optional services, see CMS (2002).

can be used for more detailed analysis of patterns of service utilization, diagnoses, and cost of care among Medicaid enrollees.

MAX includes both summary information and claims data for all Medicaid enrollees in the 50 states and the District of Columbia. It does not include information about Medicaid enrollees in Puerto Rico or other U.S. territories. All Medicaid SCHIP (M-SCHIP) expansion enrollees are included in MAX, but MAX contains only limited information for enrollees of separate SCHIP (S-SCHIP) programs. M-SCHIP enrollees, but not S-SCHIP enrollees, are included (but not separately reported) in the figures and tables of this chartbook.

MAX data are research extracts of MSIS. MSIS data, which have been collected from each state since 1999, contain enrollee eligibility information and Medicaid claims paid in each quarter of the federal fiscal year (FFY).[6] Given a standard lag of several months between service use and claim payment, claims paid in a given period are not always for services used during the same period. The MAX data system was developed to provide a calendar year utilization rather than a payment-focused version of MSIS data to serve as a research tool for the examination of Medicaid enrollment, service utilization, and expenditures by subgroup and over time. Unlike Medicaid expenditure data reported in MSIS and CMS Form-64, MAX enables the examination of Medicaid utilization and service expenditures at the individual enrollee level.

To construct MAX, MSIS claims are merged with person-level enrollment information to reflect services utilized by each enrollee during a calendar year. The MAX data system differs from MSIS in a number of ways:

- While MSIS claims files contain separate claim records for initial claims, voided claims, and positive or negative adjustments, such records are combined to reflect final service event records in MAX.
- Changes in eligibility that are reported retroactively are incorporated in MAX monthly enrollment measures.
- MSIS type-of-service information is remapped in MAX to reflect further type-of-service detail that may be helpful to researchers.
- MSIS eligibility information is remapped in MAX to correct coding inconsistencies where possible.
- MAX data have been linked to the Medicare Enrollment Database (EDB) to help identify people dually enrolled in Medicare and Medicaid. Some additional Medicare enrollment information from the EDB is included in MAX.
- MAX prescription drug claims have been linked to codes identifying drug therapeutic classes and groups. However, access to these data is limited to researchers covered under a CMS licensing agreement.

The 2002 MAX data system consists of a person summary (PS) file and four claims files for each of the 50 states and the District of Columbia. The PS file contains summary demographic and enrollment characteristics and summary claim information for each person enrolled in Medicaid in the state during a given year. Four claims files—inpatient (IP), institutional long-term care (LT), prescription drug (RX), and other service (OT)—contain claim-level detail regarding date of service, expenditures for utilized

[6] MSIS replaced the required state Medicaid reporting in Form HCFA-2082. Prior to 1999, MSIS data submission by states was optional.

services, associated diagnostic information, and provider and procedure type for all individual-level Medicaid paid services during the year.

Limitations of MAX

There are some limitations to the breadth of information contained in the MAX files. Because it contains only Medicaid-paid services, it does not capture service use or expenditures during periods of non-enrollment, services paid by other payers, or services provided at no charge. Because MAX consists only of enrollee-level information, it does not include prescription drug rebates received by Medicaid, Medicaid payments made to disproportionate share hospitals (DSH)—hospitals that serve a disproportionate share of low-income patients with special needs—payments made through upper payment limit (UPL) programs, and payments to states to cover administrative costs. DSH payments, for example, accounted for about $15.9 billion, or 6.2 percent, of total Medicaid expenditures in federal fiscal year (FFY) 2002 (Holahan and Ghosh 2005).

In addition, there are specific Medicaid subpopulations for which service information may be missing or incomplete in MAX. This is particularly important for two groups: individuals enrolled in both Medicaid and Medicare (dual enrollees) and persons enrolled in Medicaid prepaid or managed care plans (either comprehensive or partial plans).

Because Medicare is the first payer for services used by dual enrollees that are covered by both Medicare and Medicaid, MAX will capture such service use only if additional Medicaid payments are made on behalf of the enrollee for Medicare cost sharing or for shared services, such as home health. (See Chapter 5 on dual enrollees for further detail.) Medicare premiums paid by Medicaid on behalf of duals are not included in the MAX claims or person summary file.

Information in MAX about managed care is restricted to premium payments and some service-specific utilization information. It does not include service-specific expenditure information. Claims reflecting utilization of managed care services in MAX are called "encounter claims." Because encounter claims are thought to be incomplete in MAX, utilization of managed care services, by type, is not presented in this chartbook. However, managed care enrollment and premium payment information is summarized in Chapter 4 and in other locations in the chartbook.

People enrolled in comprehensive managed care plans, such as health maintenance associations (HMOs), typically have few fee-for-service (FFS) claims and are thus excluded from all tables and figures reflecting FFS service use by type. For this reason, FFS statistics from states with extensive managed care enrollment should be interpreted with caution.

Finally, as with all large data sets, MAX contains some anomalous and possibly incomplete or incorrect data elements. Users should consult MAX anomaly notes, available on the MAX website (see Resources for MAX below), for information that may explain unusual patterns in each state's data.

Source Data Used in This Chartbook

The source data used for the chartbook are limited to the MAX 2002 and earlier year person summary files, and in particular to summary tables created by CMS to validate the MAX data system each year. The source validation tables and variable construction documentation are available on the MAX website. Excel tables with more detailed enrollment, utilization, and expenditure information, by state, are available as an appendix to this chartbook.

Resources for MAX

The figures and tables in this chartbook illustrate a small set of analyses possible using MAX data. More detailed information about Medicaid prescription drug use and expenditures, for example, is available on the CMS website at the link below.

- *Medicaid Pharmacy Benefit Use and Reimbursement Statistical Compendium:*
  www.cms.hhs.gov/MedicaidDataSources GenInfo/08_MedicaidPharmacy.asp

At the time of this writing, MAX data were available for calendar years 1999 through 2002. MAX data are protected under the Privacy Act and require a data use agreement with CMS. Documentation for MAX and information about accessing MAX data for research purposes are available at the websites listed below.

- *MAX website:*
  www.cms.hhs.gov/MedicaidDataSources GenInfo/07_MAXGeneralInformation.asp
- *Research Data Assistance Center (ResDAC) (contains information about how to obtain CMS data):*
  www.resdac.umn.edu/Medicaid/
- *Information on CMS privacy protected data:*
  www.cms.hhs.gov/PrivProtectedData/02_Criteria.asp

2. A National Overview

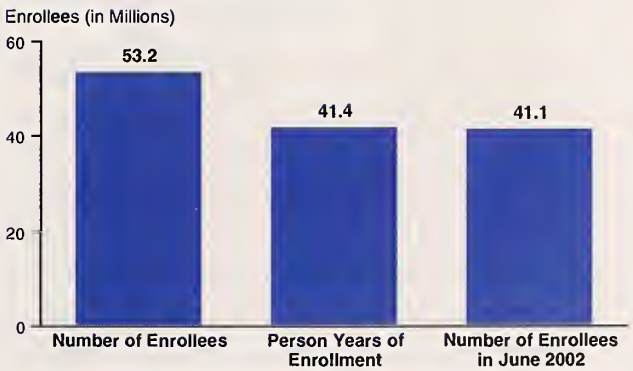
This chapter provides a national profile of Medicaid enrollees and their service utilization and expenditures in calendar year 2002. National Medicaid statistics represent the population for which federal Medicaid dollars were spent. The federal government financed well over half of the $248 billion in Medicaid outlays in 2002 (CMS 2006), reimbursing states between 50 and 76 percent for services used by Medicaid enrollees, and reimbursing at an even higher rate for children enrolled in M-SCHIP.

The summary measures presented in this chapter represent all Medicaid enrollees, but they also reflect eligibility and coverage choices made by states regarding persons and services covered by the program. States vary greatly in their Medicaid programs, and national measures can be skewed by large states such as California and New York; therefore, the national data presented in this chapter should be interpreted with caution. We provide summary information at the state level in Chapter 3.

Demographic Characteristics

Over 53 million people, or about 18.5 percent of the U.S. population, were enrolled in Medicaid in 2002. Because age, family status, and income change over time, Medicaid eligibility and thus enrollment can be transitory—only 55.3 percent of enrollees were enrolled for the entire year in 2002. After adjusting for the number of months enrolled in the program (which accounts for those individuals enrolled for less than a full year), we estimate 41.4 million person years of Medicaid enrollment, which corresponds closely with the 41.1 million persons who were enrolled in Medicaid in June of 2002 (Figure 2.1).

Figure 2.1
Total Medicaid Enrollment in 2002



Source: Medicaid Analytic Extract, 2002.

Children make up the largest age subgroup of the Medicaid population (Table 2.1). Almost 58 percent of enrollees were under age 21, including almost 4 percent who were infants (under one year of age). In comparison, working age adults—those ages 21 to 64—accounted for 32 percent of Medicaid enrollees. The elderly made up only 11 percent of all Medicaid enrollees.

Table 2.1
Characteristics of Medicaid Enrollees in 2002

	Number of Enrollees	Percentage of Enrollees
All Enrollees	53,249,159	100.0
Enrolled All Year	29,442,087	55.3
Age		
0 years	2,041,261	3.8
1-20 years	28,568,473	53.7
21-64 years	16,926,512	31.8
65 years and older	5,712,913	10.7
Race and Ethnicity		
Non-Hispanic white	23,245,519	43.7
African American	12,574,022	23.6
Hispanic or Latino	10,974,092	20.6
Asian	1,290,288	2.4
Native American	779,090	1.5
Pacific Islander	609,572	1.1
Other	3,776,576	7.1
Institutionalized[7]	1,728,226	3.2

Source: Medicaid Analytic Extract, 2002.

Non-Hispanic whites represented 43.7 percent of the Medicaid population and were the largest race or ethnic group enrolled in Medicaid in 2002. An additional 23.6 percent of enrollees were African American and 20.6 percent were Hispanic or Latino. Smaller percentages were Asian (2.4 percent), Native American or Alaska Native (1.5 percent), Pacific Islander or Native Hawaiian (1.1 percent), or other race or ethnicity (7.1 percent).

Although a large portion of Medicaid expenditures is devoted to long-term care services, only 3.2 percent of enrollees were institutionalized in 2002 (see Table 2.1). The number who were institutionalized corresponds to more than a fourth of elderly Medicaid enrollees, the primary users of long-term care.

[7] Institutionalized enrollees include those receiving Medicaid covered services in nursing homes, intermediate care facilities for the mentally retarded (ICF/MR), mental hospitals for the aged, or inpatient psychiatric facilities for individuals under age 21 anytime in 2002.

Eligibility Characteristics

Medicaid enrollees are classified by two eligibility groups: basis of eligibility (BOE) and maintenance assistance status (MAS). The BOE groups are important because not all low-income people qualify for Medicaid. Instead, Medicaid eligibility is available to four broad BOE groups:

- *Children:* persons under age 18 or up to age 21 in states electing to cover older children
- *Adults:* pregnant women and caretaker relatives in families with dependent (minor) children[8]
- *Aged:* people age 65 or older
- *Disabled:* persons of any age (including children) who are unable to engage in substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or that has lasted or can be expected to last for a continuous period of not less than twelve months[9]

A subset of the population that is generally not covered by state Medicaid programs includes non-disabled working age adults without dependent children. Non-disabled childless adults only qualify for Medicaid in a few states with waivers—for example, Massachusetts, New York, and Wisconsin.

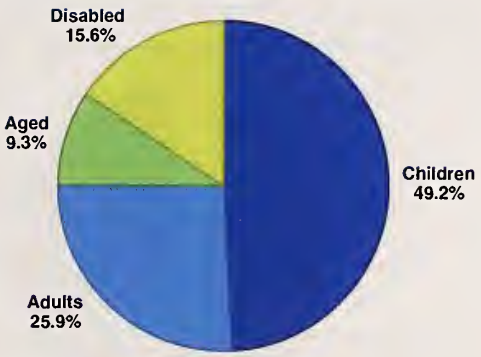
Figure 2.2 shows the composition of Medicaid enrollees by BOE in 2002. Consistent with the Medicaid population's age distribution, those in

[8] Most caretaker relatives of dependent children are parents, but this group can also include other family members serving as caretakers, such as aunts or grandparents. In a few states with waivers, the adult BOE group includes childless adults.

[9] This definition of disability is employed in Medicare and Medicaid and in the income security programs with which they are associated, including Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI).

the child BOE group made up almost half of all enrollees; eligible adults accounted for about a quarter of Medicaid enrollees; smaller shares were aged (9.3 percent) or disabled (15.6 percent).

Figure 2.2
Medicaid Enrollment by Basis of Eligibility in 2002



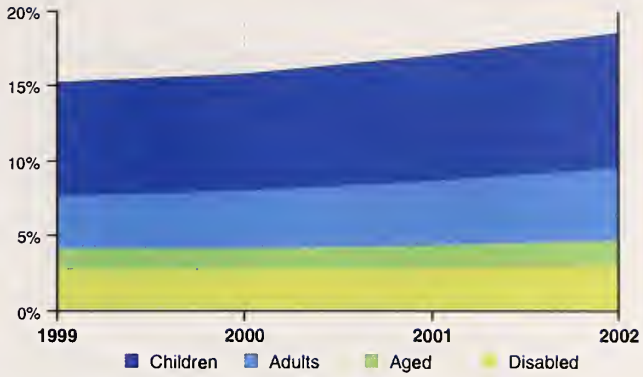
Source: Medicaid Analytic Extract, 2002.

Medicaid enrollment rose from 15.2 to 18.5 percent of the population between 1999 and 2002 (Figure 2.3). This trend was largely due to an increased enrollment of adults. Medicaid adult enrollment (as a percentage of the population) increased by 26 percent during this period, compared to 16.7 percent growth for children, 14.6 percent for aged, and 8.6 percent for disabled enrollees. However, much of this growth is accounted for by expansions in Medicaid family planning only programs, which by 2002 accounted for about 20 percent of adult enrollees.[10]

In 2002, aged and disabled enrollees reflected only a quarter of all Medicaid enrollees, but they accounted for the vast majority (82 percent) of Medicaid expenditures (see Figure 2.4). Over half of all expenditures paid on behalf of enrollees was for the disabled; another 31 percent was spent on the aged. In comparison, children accounted for 11 percent and adults accounted for 7 percent of all Medicaid expenditures in 2002.

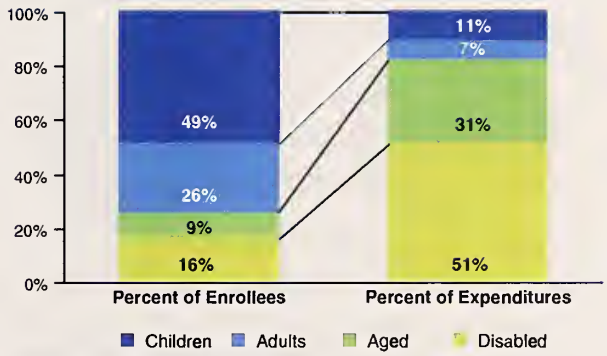
[10] For example, California's family planning only program began in December of 1999 and by 2002 was expanded to include over 2.2 million enrollees. Family planning only enrollees receive only family planning assistance rather than comprehensive health benefits.

Figure 2.3
Percentage of the Population Enrolled in Medicaid, 1999-2002



Source: Medicaid Analytic Extract, 1999-2002.

Figure 2.4
Medicaid Enrollment and Expenditure by Basis of Eligibility in 2002



Source: Medicaid Analytic Extract, 2002.

While BOE reflects the population subgroup by which a person becomes eligible for Medicaid, MAS reflects the primary financial eligibility criteria met by the enrollee. The five MAS categories include cash assistance-related, medically needy, poverty-related, 1115 waiver, and "other."

- *Cash assistance-related:* persons receiving SSI benefits and those who would have qualified under the pre-welfare reform Aid to Families with

Dependent Children (AFDC) rules (hence the name "cash assistance").[11]

- *Medically needy:* persons qualifying through the medically needy provision (a state option) that allows for a higher income threshold than required by the AFDC cash assistance level; persons with income above the threshold can deduct incurred medical expenses from their income and/or assets—or "spend down" their income/assets—to determine financial eligibility.

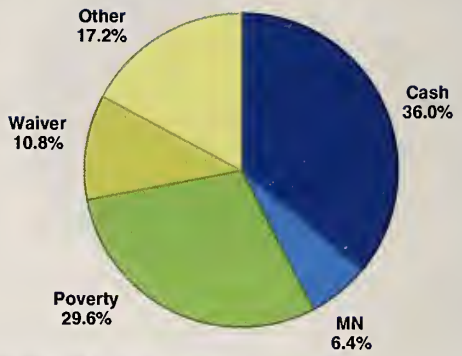
- *Poverty-related:* persons qualifying through any poverty-related Medicaid expansions enacted from 1988 on; in addition, this group includes QMB, SLMB, and QI dual groups described in Chapter 1 (see also Schneider et al. 2002 for details).

- *1115 waiver:* people only eligible via a state 1115 waiver program that extends benefits to certain otherwise ineligible persons.[12]

- *Other:* a mixture of mandatory and optional coverage groups not reported under the MAS groupings listed above, including but not limited to many institutionalized aged and disabled, those qualifying through hospice and home- and community-based care waivers, and immigrants who qualify for emergency Medicaid benefits only.

People qualifying under the cash assistance-related rules comprised the largest MAS subgroup (36.0 percent) in 2002 (Figure 2.5). Another 29.6 percent were eligible due to the poverty-related rules, 10.8 percent were eligible under a state waiver program, and 6.4 percent were medically needy.

Figure 2.5
Medicaid Enrollment by Maintenance Assistance Status in 2002



Source: Medicaid Analytic Extract, 2002.
MN = medically needy.

Maintenance assistance status varies greatly by basis of eligibility (Figure 2.6). Receipt of cash assistance remains the primary route to Medicaid eligibility for aged and disabled enrollees. Cash assistance is also the primary route to eligibility for most adults qualifying for full Medicaid benefits. The 1115 waiver provision also enables many adults to qualify for Medicaid, but many of these 1115 adults only qualify for family planning benefits. Almost half of all child enrollees qualify for Medicaid by poverty-related criteria.

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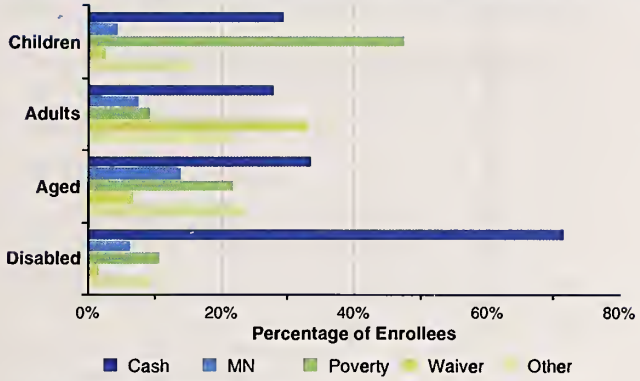
[11] Although the 1996 welfare reform legislation replaced AFDC with Temporary Assistance to Needy Families (TANF), 1996 AFDC rules are still used to determine eligibility for Medicaid. Section 1931 refers to the section of the Social Security Act that specifies AFDC-related eligibility after welfare reform. States have some flexibility in changing income and asset limits for Section 1931 coverage.

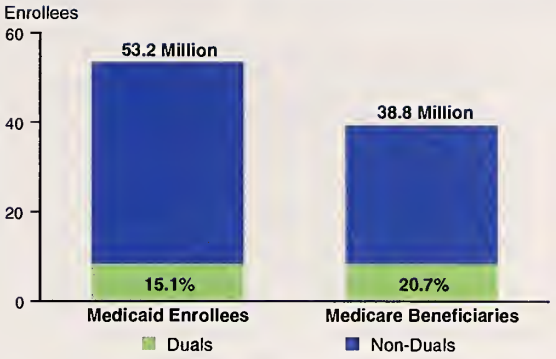
[12] Some states provide only limited family planning benefits or other limited services to 1115 adults. However, a few states provide full Medicaid benefits to persons qualifying through 1115 provisions.

Figure 2.6
Maintenance Assistance Status by Basis of Eligibility in 2002



Source: Medicaid Analytic Extract, 2002.
MN = medically needy.

Figure 2.7
Ever Enrolled in Both Medicare and Medicaid in 2002



Sources: Medicaid Analytic Extract, 2002; 2002 Medicare and Medicaid Statistical Supplement.

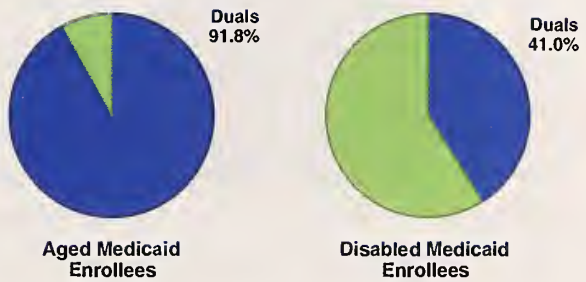
Dual Enrollees

Most aged and many disabled Medicaid enrollees are dually eligible for both Medicare and Medicaid. We refer to such enrollees as "dual enrollees" or simply "duals." Medicare enrollment was identified in MAX by a match to the Medicare Enrollment Database (EDB). In this chartbook, dual enrollees are defined as those in the Medicaid data files with matching records in the EDB, indicating enrollment in both Medicare and Medicaid in at least one month in 2002.

In total, there were 8 million duals in 2002. These duals represented 15.1 percent of the 53.2 million Medicaid enrollees and 20.7 percent of all Medicare beneficiaries that year (Figure 2.7). Almost 92 percent of aged Medicaid enrollees and about 41 percent of disabled enrollees were duals in 2002 (Figure 2.8).

Because duals are among the most vulnerable and costly Medicaid enrollees, we examine their enrollment characteristics, service use, and expenditures separately in Chapter 5 of this chartbook. However, in reviewing information presented on duals in this and subsequent chapters, readers should keep in mind that because Medicare covers most acute care

Figure 2.8
Percentage Ever Dually Enrolled in Both Medicare and Medicaid in 2002



Source: Medicaid Analytic Extract, 2002.

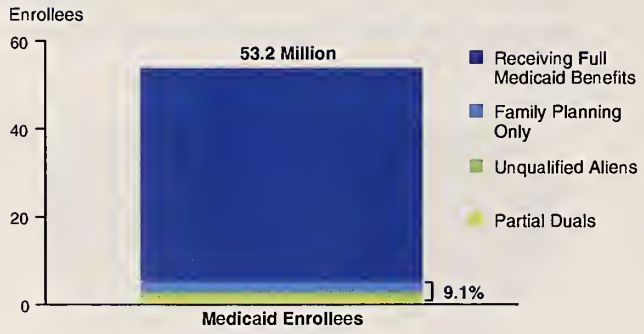
services for duals, Medicaid utilization and expenditures understate their overall use and cost of those services. Among duals, Medicaid utilization and expenditure statistics for Medicare-covered services only reflect payments for Medicare cost-sharing. Data on Medicaid utilization and expenditures for services with only limited Medicare coverage, such as long-term care, are much more complete.

Restricted-Benefit Enrollees

The majority of Medicaid enrollees, including duals, qualify for full Medicaid benefits provided in their state. However, a subset of enrollees receives only limited health coverage. Restricted-benefit enrollees

include (1) "unqualified" aliens eligible for only emergency hospital services, (2) duals receiving only coverage for Medicare premiums and cost sharing, and (3) people receiving only family planning services.[13] These three groups of restricted-benefit enrollees represented about 9 percent of Medicaid enrollees in 2002 (Figure 2.9). Corresponding to the limited set of services provided to these enrollees, this group accounted for only 1.3 percent of total Medicaid expenditures in 2002.

Figure 2.9
Medicaid Enrollees Receiving Only Restricted Medicaid Benefits in 2002



Source: Medicaid Analytic Extract, 2002.
Dual = ever enrolled in both Medicare and Medicaid in 2002.

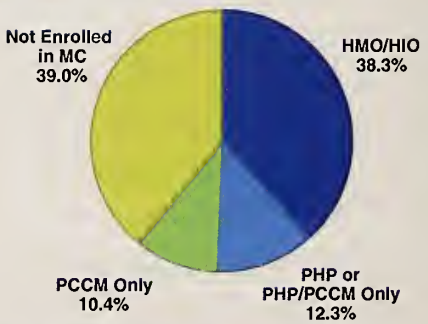
Managed Care

Medicaid managed care plans are prepaid plans for bundled health services. There are three general types of managed care referred to in the MAX data system: (1) health maintenance organizations (HMOs) or health insuring organizations (HIOs), (2) prepaid health plans (PHPs), and (3) primary care case management (PCCM) plans.

For the most part, HMOs and HIOs are comprehensive prepaid plans that cover most health services for their enrollees. PHPs are typically more limited in their scope of coverage and coverage varies greatly by plan. They may cover, for example, only dental care or behavioral health services. PCCMs are the least comprehensive managed care type identified in MAX. PCCMs involve the payment of a small premium (often 3 dollars per month) for case management services only. Even though care provided by PCCMs is managed care, most services are provided on a fee-for-service basis. In some states, PCCM premiums are not paid unless case management services are delivered.

Sixty-one percent of all Medicaid enrollees in 2002 were enrolled in some type of managed care: 38.3 percent were ever enrolled in HMOs/HIOs, 12.3 percent were enrolled only in PHPs or in a combination of PHPs and PCCMs, and 10.4 percent were in PCCMs only (Figure 2.10).

Figure 2.10
Managed Care (MC) Enrollment in 2002

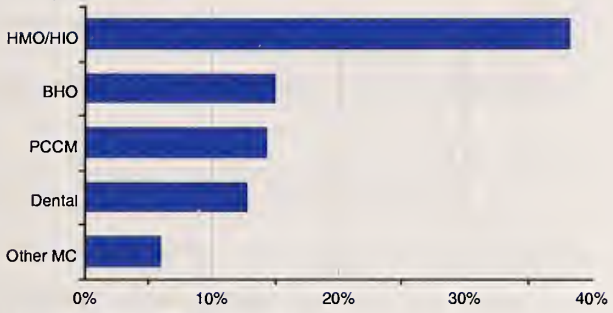


Source: Medicaid Analytic Extract, 2002.
HMO/HIO = health maintenance organization or health insuring organization.
PCCM = primary care case management.
PHP = prepaid health plan.

People may enroll in more than one Medicaid managed care plan. More than 15 percent were ever enrolled in behavioral health organizations in 2002, 14.4 percent were ever enrolled in PCCMs, almost 12.8 percent were in dental plans, and another 6.3 percent were enrolled in some other managed care plan (Figure 2.11). For information about managed care enrollment combinations in June of 2002, see Chapter 4.

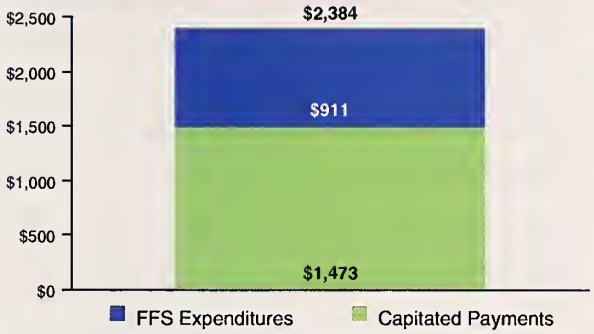
[13] Unqualified aliens generally include illegal immigrants and immigrants entering the U.S. legally after 1996 for 5 years from their date of entry.

Figure 2.11
Percentage Ever Enrolled in Managed Care (MC) in 2002, by Type of Plan



Source: Medicaid Analytic Extract, 2002.
BHO = behavioral health organization.
HMO/HIO = health maintenance organization or health insuring organization.
PCCM = primary care case management.

Figure 2.12
Per-Enrollee Expenditures Among People Ever Enrolled in HMOs/HIOs in 2002



Source: Medicaid Analytic Extract, 2002.
FFS = fee-for-service.
HMO/HIO = health maintenance organization or health insuring organization.

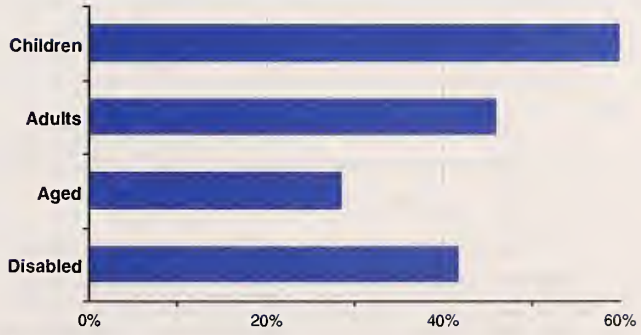
As described in Chapter 1, MAX contains limited information on service utilization and costs incurred under managed care. MAX claims data contain premium payments and some encounter claims, but not expenditure data, for services received under prepaid plans. Because most services used by people in HMOs/HIOs are prepaid, such individuals are excluded from all analyses in this chartbook that are based on fee-for-service (FFS) claims records.

Note that capitated payments do not reflect all expenditures for people in managed care; people in managed care plans may have both capitated and FFS payments. For example, those in HMOs/HIOs at some point in 2002 may have been enrolled in FFS Medicaid during other months of the year. They may also have FFS claims for services that are "carved out" of their plan (for example, services for behavioral health.) Meanwhile, people enrolled in only PHP or PCCM managed care typically have most of their services covered by FFS payments.

Figure 2.12 shows per-enrollee expenditures for full-benefit HMO/HIO enrollees by type of payment. Most expenditures for HMO/HIO enrollees in 2002 were for capitated care, although a significant share—$911 of $2,384 (38 percent)—went to FFS payments. (For more detailed information about FFS utilization among HMO and HIO enrollees, see Chapter 4.)

It is important to keep in mind that managed care enrollees can differ greatly in their demographic and enrollment characteristics from people receiving FFS care. Figure 2.13 shows that children were the most likely, and aged were the least likely, to be enrolled in either an HMO/HIO or PHP during 2002.

Figure 2.13
Percentage of Medicaid Enrollees Ever Enrolled in HMOs/HIOs or PHPs in 2002, by Basis of Eligibility



Source: Medicaid Analytic Extract, 2002.
HMO/HIO = health maintenance organization or health insuring organization.
PHP = prepaid health plan.

Total Medicaid Expenditures

Almost $211 billion was spent on Medicaid covered services in 2002: about $208 billion for full-benefit enrollees and about $2.6 billion for the growing number of enrollees with only restricted Medicaid benefits.

Among those with full benefits, FFS payments accounted for a large majority (84 percent) of all Medicaid expenditures in 2002 (Figure 2.14).

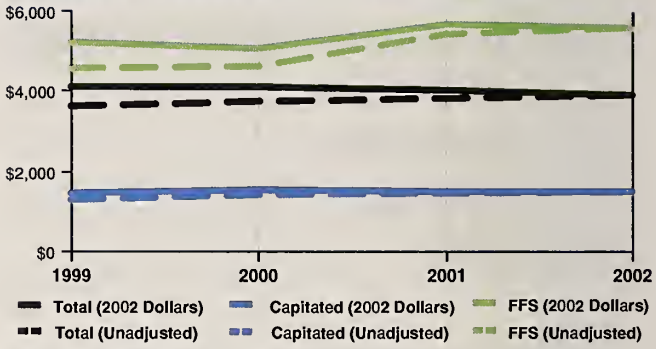
Figure 2.14
Fee-for-Service (FFS) and Capitated Payments Among Full-Benefit Medicaid Enrollees in 2002

Source: Medicaid Analytic Extract, 2002.

We refer to full-benefit enrollees who never enrolled in HMOs/HIOs in 2002 as "FFS enrollees." For all full-benefit enrollees—including FFS enrollees and those enrolled in HMOs/HIOs—unadjusted average expenditures rose slightly between 1999 and 2002. However, when measured in 2002 dollars, they declined by almost 5 percent (Figure 2.15).[14]

[14] The following Current Price Index was used to adjust expenditures: U.S. City Average, All Urban Consumer, Medical Care Series Total (CUUR0000SAM). Some restricted-benefit enrollees may be included in the estimates for 1999 and 2000 in Figure 2.15. Because restricted-benefit enrollees have lower expenditures per enrollee, the presented figures may underestimate 1999 and 2000 costs.

Figure 2.15
Per-Enrollee Expenditure Trends Among Full-Benefit Enrollees (in Unadjusted and 2002 Dollars), 1999-2002



Source: Medicaid Analytic Extract, 1999-2002.
Note: Capitated dollars are per HMO/HIO enrollee; FFS dollars are per FFS enrollee.

Capitated payments per enrollee in an HMO/HIO rose by 4.5 percent between 1999 and 2002, while FFS expenditures per FFS enrollee increased by 7.7 percent (or 19.1 and 22.7 percent, respectively, in unadjusted dollars). Note that because children and adults are more likely to enroll in managed care than the aged and disabled, and typically have lower medical expenditures, average expenditures for FFS enrollees are not directly comparable to those of people enrolled in HMOs/HIOs.

Medicaid FFS Utilization and Expenditures

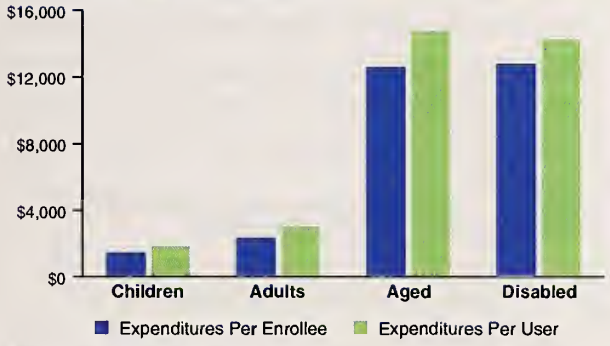
The MAX data system enables detailed analyses of patterns of service use and expenditures by type among FFS enrollees. MAX contains information about all Medicaid FFS claims paid in a given year. In this chartbook we restrict our analyses of service use and costs to only those FFS enrollees receiving full Medicaid benefits. Persons eligible for only limited services are not included because they can distort average per capita expenditure estimates.

The majority of FFS enrollees (82 percent) used at least one service in 2002; 89.7 percent of FFS disabled enrollees and 85.4 percent of FFS aged (statistics not shown) used at least one Medicaid

service. About 80 percent of FFS children and 76.2 percent of FFS adults used services in 2002.

Average FFS expenditures were substantially higher among aged or disabled enrollees compared to children and adults (Figure 2.16). FFS costs were $12,464 per aged and $12,678 per disabled FFS enrollee. In comparison, FFS costs among children and adults averaged $1,379 and $2,217, respectively. Average expenditures among those who used services were higher but followed a similar pattern by basis of eligibility.

Figure 2.16
Fee-for-Service (FFS) Expenditures Among FFS Enrollees in 2002, by Basis of Eligibility



Source: Medicaid Analytic Extract, 2002.
FFS enrollees = full-benefit enrollees not enrolled in HMOs/HIOs in 2002.

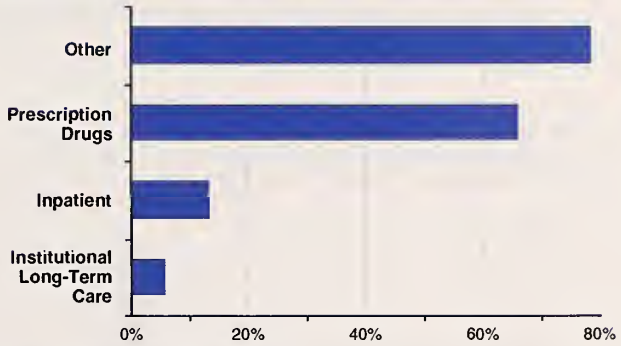
Services in MAX are categorized into one of 30 types of services in the person summary file. These service types can be grouped into four categories that generally correspond to four types of claim files available in MAX: inpatient (IP), institutional long-term care (LT), prescription drug (RX), and other (OT).[15] While IP and RX contain individual types of services, LT claims are composed of

- Nursing facility services
- Intermediate care facilities for the mentally retarded (ICF/MR)
- Mental hospital services for the aged
- Inpatient psychiatric facility services for people under age 21

OT claims consist of all claims not included in the other three groups. These include community long-term care services such as private duty nursing, residential care, and home health; physician and other ambulatory services; and lab, X-ray, supplies, and other wraparound services.

The most commonly used services by FFS enrollees were prescription drugs and the broad category of OT or other services (Figure 2.17). About 78 percent used an OT service and 66 percent had a prescription filled in 2002. In comparison, only 13.2 used inpatient and 5.8 percent used institutional long-term care services during the year.

Figure 2.17
Percentage of Fee-for-Service (FFS) Enrollees Using Services in 2002, by Type of Service

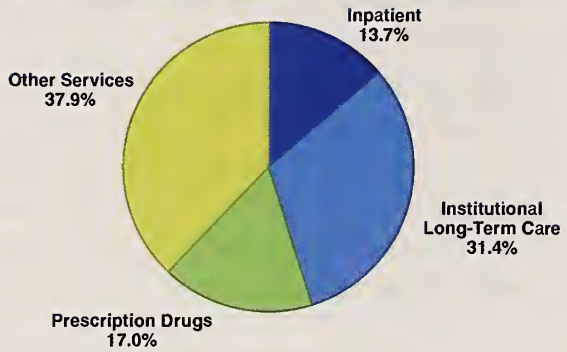


Source: Medicaid Analytic Extract, 2002.
FFS enrollees = full-benefit enrollees not enrolled in HMOs/HIOs in 2002.

High utilization of OT services corresponded with high overall OT expenditures. Of the four general categories of services, OT services accounted for the largest share (37.9 percent) of FFS expenditures (Figure 2.18). Because the OT category consists of a wide variety of service types, further investigation of OT service use is warranted. Chapter 6 provides additional utilization and expenditure information by detailed type of service.

[15] Certain types of service claims may be found in one of two or more claim file types. For example, while most durable medical equipment claims are in OT files, some may be placed in RX files. See MAX data documentation for details.

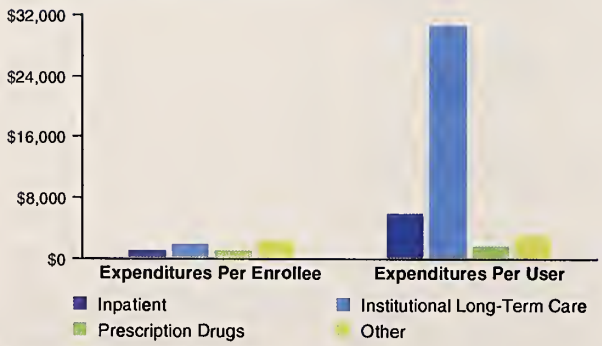
Figure 2.18
Composition of Medicaid Fee-for-Service (FFS) Expenditures Among FFS Enrollees in 2002, by Type of Service



Source: Medicaid Analytic Extract, 2002.

Institutional long-term care was the most expensive type of service among persons utilizing the service. Institutional care was used by only 5.8 percent of FFS enrollees but accounted for 31.4 percent of all FFS expenditures. The high unit cost of institutional care is illustrated in Figure 2.19. While average institutional long-term care costs among FFS enrollees were $1,752 in 2002, expenditures per enrollee using such services were $30,367.

Figure 2.19
Per-Enrollee Fee-for-Service (FFS) Expenditures Among FFS Enrollees in 2002, by Type of Service

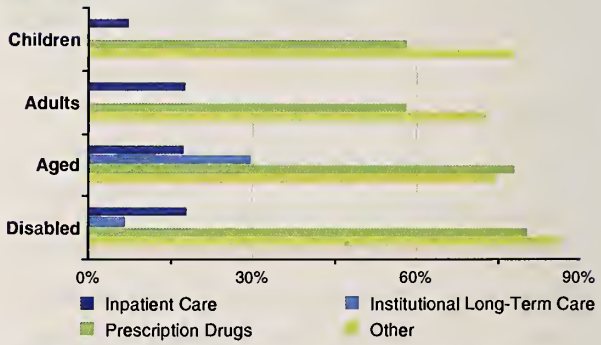


Source: Medicaid Analytic Extract, 2002.

Of the four service type categories, inpatient care represented the smallest share (13.7 percent) of FFS expenditures in the FFS subpopulation. This is due in part to the coverage of most inpatient services by Medicare among duals.

FFS utilization and expenditures vary greatly by basis of eligibility (Figure 2.20). The percent using inpatient services was between 17.5 and 18.2 percent among adults, aged, and disabled enrollees but only 7.5 percent among children. Almost 30 percent of aged enrollees used institutional long-term care services, compared to only 0.3 percent of children, 0.1 percent of adults, and 6.9 percent of disabled enrollees. The percent who filled at least one prescription varied from 58.1 percent among adults to 80.6 percent among the disabled. Meanwhile, OT services were used widely by all four BOE groups.

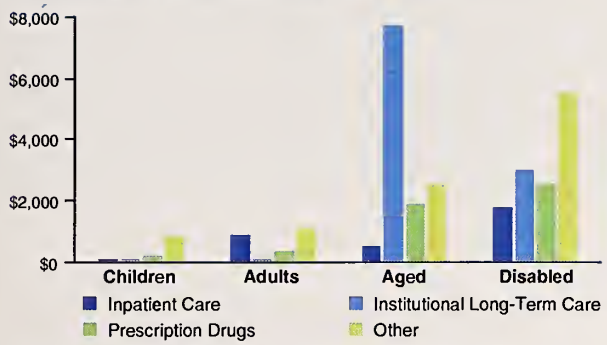
Figure 2.20
Percentage of Fee-for-Service (FFS) Enrollees Using Services in 2002, by Basis of Eligibility



Source: Medicaid Analytic Extract, 2002.
FFS enrollees = full-benefit enrollees not enrolled in HMOs/HIOs in 2002.

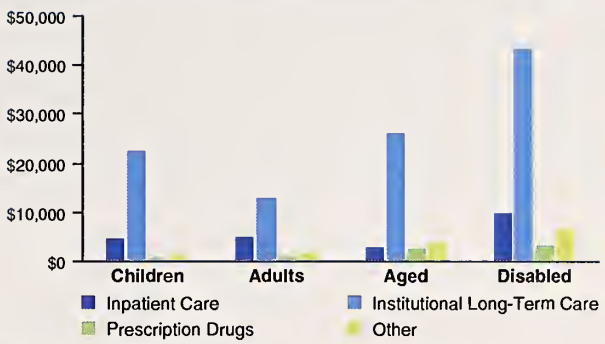
The most costly services corresponded to the most utilized services in most BOE groups (Figure 2.21). OT services were the most costly type of service per enrollee among children, adults, and the disabled. Among aged enrollees, however, average institutional long-term care expenditures far exceeded average expenditures for all other services.

Figure 2.21
Per-Enrollee Fee-for-Service (FFS) Expenditures Among FFS Enrollees in 2002, by Basis of Eligibility



Source: Medicaid Analytic Extract, 2002.
FFS enrollees = full-benefit enrollees not enrolled in HMOs/HIOs in 2002.

Figure 2.22
Fee-for-Service (FFS) Expenditures per User Among FFS Enrollees in 2002, by Basis of Eligibility



Source: Medicaid Analytic Extract, 2002.
FFS enrollees = full-benefit enrollees not enrolled in HMOs/HIOs in 2002.

Average per-user expenditures were highest for institutional long-term care in each BOE group (Figure 2.22). For the subset of enrollees using such long-term care services, average expenditures were $22,170 among children, $12,663 among adults, $25,908 among aged, and $43,104 among the disabled.

The utilization and expenditures of other population subgroups and service types are topics for further research. For example, see Chapter 5 for a summary of FFS expenditures among dual enrollees. Chapter 6 presents detailed service type information for all FFS enrollees and for FFS duals. In the following chapter, we examine variation in Medicaid enrollment, utilization, and expenditures across states.

3. State-Level Detail

Beyond providing mandatorily covered services to mandatorily eligible persons, states have a great deal of flexibility in determining their Medicaid program's eligibility criteria and medical benefits (see Chapter 1 for details). In general, each state has a unique and distinct Medicaid program, and as a result there is large variation in the composition of Medicaid enrollees, Medicaid utilization, and Medicaid expenditures across states.

States also differ in their demographic characteristics and economic status. States with particularly large elderly and poor populations will have more Medicaid eligible residents as a share of their total population. In addition, the federal match rate (FMAP) varied between 50 and 76 percent in 2002, with higher matching allocated to states with lower per capita income. The variation in the FMAP results in variation in the cost of Medicaid to states, which can in turn affect the types of services and people that states choose to cover in their optional programs. States also differ in their reimbursement to medical facilities, physicians, and other practitioners for Medicaid-covered services. As a result, the cost of care and incentives to use certain services can vary throughout the United States.

Because so many factors affect state Medicaid programs, it is difficult to compare Medicaid enrollee characteristics, utilization, and costs between states. Nevertheless, common federal guidelines and a common data reporting system (MSIS) together make the examination of state-level summary statistics useful and feasible. The MAX data system, which is derived from MSIS, can be used to examine any state's Medicaid population in a national context.

In this chapter, we present summary information illustrating the variation in Medicaid enrollment, utilization, and expenditures across states. Although we discuss some of the characteristics that may explain observed differences between states, our examination is by no means comprehensive. The discussions in this chapter are intended only to suggest the complexity of factors that affect states' Medicaid enrollment, utilization, and costs.

When interpreting statistics presented in this chapter, we encourage readers to review the lists of MAX 2002 eligibility and claim anomalies available on the MAX website. In addition to listing anomalous data, the anomaly notes identify unusual aspects of state Medicaid programs that might affect data in MAX. This is particularly useful for interpreting summary measures at state-level detail.

Demographic Characteristics

More than 53 million people were enrolled in Medicaid in 2002, from 70 thousand in Wyoming to 9.5 million in California (Table 3.1). Enrollees in three states—California, New York, and Texas—

Table 3.1
Medicaid Enrollment in 2002

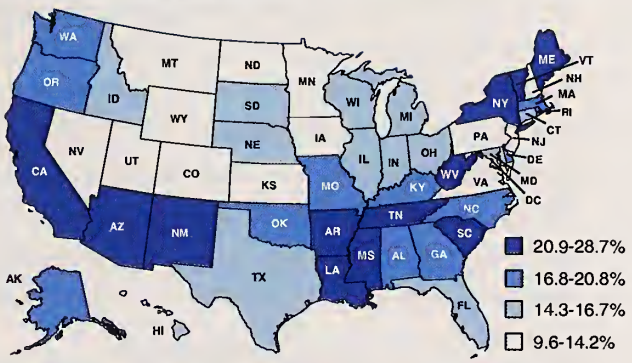
	Number of Enrollees	Percentage of Population	Percentage Enrolled All Year	Total Person-Years of Enrollment	Number of Enrollees in June 2002
United States	**53,249,159**	**18.5**	**55.3**	**41,437,049**	**41,118,773**
Alabama	859,136	19.2	61.6	707,655	703,583
Alaska	124,466	19.4	35.1	89,116	92,345
Arizona	1,139,436	21.0	42.7	816,656	804,129
Arkansas	644,566	23.8	59.7	510,137	492,147
California	9,539,318	27.3	54.5	7,495,989	7,474,761
Colorado	447,329	9.9	48.9	333,131	329,883
Connecticut	497,007	14.4	63.5	409,689	407,996
Delaware	150,189	18.6	53.4	116,657	115,312
District of Columbia	152,568	27.0	68.8	130,079	129,808
Florida	2,745,729	16.5	51.1	2,072,435	2,070,913
Georgia	1,583,105	18.4	45.0	1,132,073	1,090,633
Hawaii	206,604	16.7	58.3	163,175	158,636
Idaho	199,674	14.9	54.2	153,537	152,411
Illinois	2,104,850	16.7	55.5	1,628,175	1,646,486
Indiana	918,661	14.9	54.7	715,617	723,175
Iowa	363,218	12.4	51.9	274,263	271,034
Kansas	311,084	11.5	46.1	228,282	215,195
Kentucky	788,947	19.3	57.9	628,101	620,695
Louisiana	1,046,074	23.4	61.9	838,929	827,767
Maine	359,485	27.7	73.5	311,945	307,581
Maryland	789,260	14.5	61.9	636,641	625,666
Massachusetts	1,210,399	18.9	64.5	1,006,099	1,002,798
Michigan	1,548,615	15.4	58.2	1,230,909	1,226,868
Minnesota	694,738	13.8	54.0	526,305	520,288
Mississippi	716,727	25.0	62.1	589,863	582,224
Missouri	1,128,690	19.9	66.9	942,746	942,465
Montana	108,720	11.9	46.5	78,664	79,066
Nebraska	268,306	15.5	57.7	214,886	215,609
Nevada	219,336	10.1	38.8	148,157	144,286
New Hampshire	122,576	9.6	50.2	90,816	87,808
New Jersey	1,019,452	11.9	61.4	824,777	831,336
New Mexico	465,415	25.1	61.3	382,124	380,722
New York	4,527,583	23.6	53.9	3,423,283	3,364,341
North Carolina	1,425,322	17.1	56.4	1,114,667	1,107,957
North Dakota	73,623	11.6	50.2	54,645	54,149
Ohio	1,835,819	16.1	57.4	1,447,435	1,410,735
Oklahoma	718,198	20.6	40.7	494,117	495,688
Oregon	648,195	18.4	38.9	450,664	453,245
Pennsylvania	1,732,000	14.1	64.8	1,429,011	1,420,974
Rhode Island	206,557	19.3	67.2	173,598	172,422
South Carolina	932,954	22.7	72.3	805,881	798,351
South Dakota	117,356	15.4	54.2	90,923	90,428
Tennessee	1,660,072	28.7	68.0	1,435,695	1,447,879
Texas	3,358,234	15.5	44.6	2,403,352	2,383,807
Utah	250,703	10.7	33.7	157,655	153,529
Vermont	158,434	25.7	57.4	126,728	128,067
Virginia	739,755	10.2	51.9	554,260	546,327
Washington	1,130,908	18.6	55.4	896,710	887,809
West Virginia	377,326	20.9	49.5	280,689	277,117
Wisconsin	812,511	14.9	54.8	618,992	601,784
Wyoming	69,929	14.0	45.9	51,118	50,538

Source: Medicaid Analytic Extract, 2002.

alone made up a third of all Medicaid enrollees in 2002. National averages are often skewed by these states and thus can be poor indicators of the characteristics of Medicaid enrollees in any one individual state.

Medicaid enrollment ranged from 9.6 percent of the population in New Hampshire to 28.7 percent in Tennessee. Because Medicaid is a means-tested program, high Medicaid enrollment typically indicates a high poverty rate. In general, Medicaid enrollment is higher in southern states (Figure 3.1). Other factors, such as state eligibility criteria, will also influence Medicaid enrollment. Maine, for example, added a special prescription drug only benefit for low-income aged and disabled people under an 1115 demonstration in 2001. As a result, Maine had the second highest rate of Medicaid enrollment in 2002 (27.7 percent).

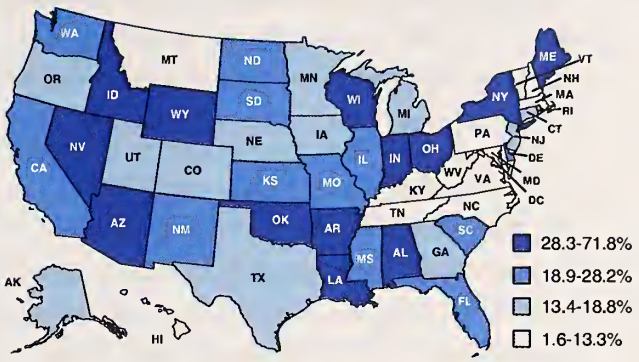
Figure 3.1
Percentage of the Population (in Quartiles) Enrolled in Medicaid in 2002



Source: Medicaid Analytic Extract, 2002.

Between 1999 and 2002, Medicaid enrollment grew 21.3 percent, increasing in all 50 states and the District of Columbia (Figure 3.2). The growth in enrollment over the three-year period ranged from 1.7 percent in Pennsylvania and Hawaii to 71.8 percent in Maine, and varied widely across the states.

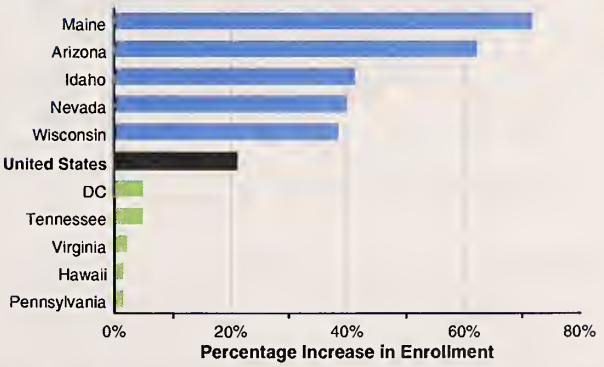
Figure 3.2
Growth in Medicaid Enrollment (in Quartiles), 1999-2002



Source: Medicaid Analytic Extract, 1999-2002.

The highest growth in enrollment occurred in Maine and Arizona (Figure 3.3). Maine's program increased substantially between 2000 and 2001, when enrollment grew from 16.7 percent to 25.4 percent of Maine's population to include many low-income aged and disabled. Arizona extended coverage to some childless adults as well as to some parents of SCHIP-eligible children.

Figure 3.3
Growth in Medicaid Enrollment, 1999-2002: Top and Bottom 5 States



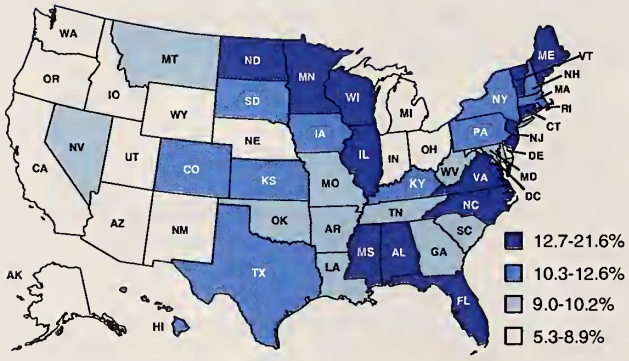
Source: Medicaid Analytic Extract, 1999-2002.

High enrollment growth does not necessarily indicate a high enrollment rate. The top 5 states in enrollment growth between 1999 and 2002 also included Idaho, Nevada, and Wisconsin. In each of these states, the enrollment rate was below the national average in 1999 and remained so in 2002.

Low-growth states included several with pre-1999 expansions. For example, Tennessee's TennCare and Hawaii's QUEST programs were implemented in 1994. By 1999, enrollment in both states had already exceeded the national average. (See Appendix Table A3.2 for details.)

There is a strong relationship between age and service utilization and expenditures among Medicaid enrollees. Children and non-disabled adults often use only limited services, whereas disabled adults and the elderly tend to use a variety of prescription drugs and expensive long-term care. Figure 3.4 shows the percentage of the Medicaid population in each state that was 65 or older in 2002, one indication of the density of higher-cost enrollees.

Figure 3.4
Percentage of Medicaid Enrollees (in Quartiles) Who Were 65 and Older in 2002

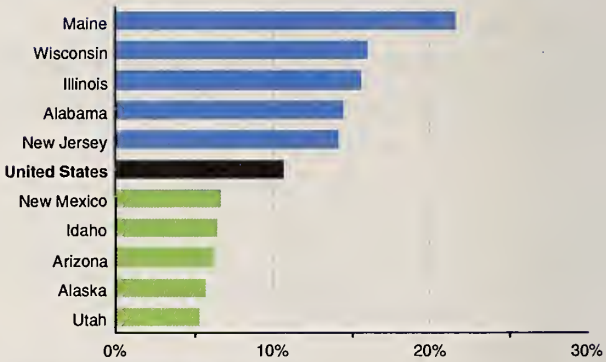


Source: Medicaid Analytic Extract, 2002.

States with larger numbers of elderly in their Medicaid populations tended to be those with larger numbers of elderly in their general populations. Of all states, Florida had the highest proportion of elderly in its general population in 2002 and was also in the top quartile of states in the percentage of enrollees who were 65 and older (13.0 percent compared with 10.7 percent nationally). Similarly, Maine and North Dakota had higher percentages of elderly in their general populations and higher than average percentages of elderly Medicaid enrollees.

Other factors that influence the age distribution of Medicaid enrollees in a state are expansions to cover children and 1115 adults. For example, while the percentage of Arizona's elderly population exceeded the national average, expansive state waiver programs for children and adults resulted in a relatively small proportion of elderly among Arizona's Medicaid enrollees in 2002 (Figure 3.5).

Figure 3.5
Percentage of Medicaid Enrollees Who Were 65 and Older in 2002: Top and Bottom 5 States



Source: Medicaid Analytic Extract, 2002.

Additional details about the demographic make-up of state Medicaid populations are available in the appendix tables: tables A3.3, A3.4, and A3.5 summarize the age distribution, racial composition, and institutional status of state Medicaid enrollees, respectively.

Enrollment Characteristics

As described in Chapter 2, Medicaid enrollees are categorized by their basis of eligibility as children, adults, aged, or disabled. These eligibility groups typically correspond to enrollee age groups, with the exception of the disabled, who can be of any age. Like the Medicaid population's age distribution, the make-up of enrollees by basis of eligibility depends

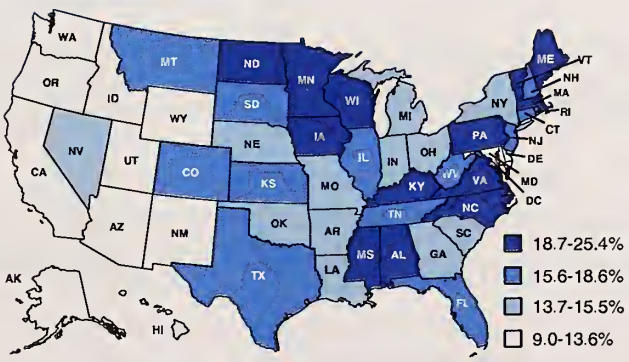
on a state's demographic composition, state eligibility rules, and a myriad of other factors.

Table 3.2 shows the variation in eligibility groups across states. Compared with the composition of enrollees in other states, Maine's Medicaid population was most equally distributed between the four eligibility groups, whereas Oklahoma's enrollees were most heavily weighted toward children. The percentage of enrollees who were children in 2002 ranged from 29.1 percent in Maine to 65.0 percent in Oklahoma. Table 3.2 also shows the percentage of enrollees that were in one of two typically costly eligibility groups—aged and disabled. Connecticut had the highest percentage of aged or disabled enrollees in 2002 (58.3 percent), followed by Ohio (54.6 percent), Maine (53.7 percent), and Minnesota (50.4 percent). (See appendix tables A3.6 to A3.8 for additional information about basis of eligibility and maintenance assistance status categories by state.)

Almost all aged and many disabled enrollees are eligible for both Medicare and Medicaid (see Chapter 5 for details). Figure 3.6 shows the variation in the percentage of enrollees who were duals in 2002, ranging from 9.1 in Arizona to 25.4 in Maine. High dual enrollment corresponded closely with the percentage who were 65 or older. States that did not follow this pattern typically had higher than average dual enrollment among aged enrollees. (See Appendix Table A3.9.)

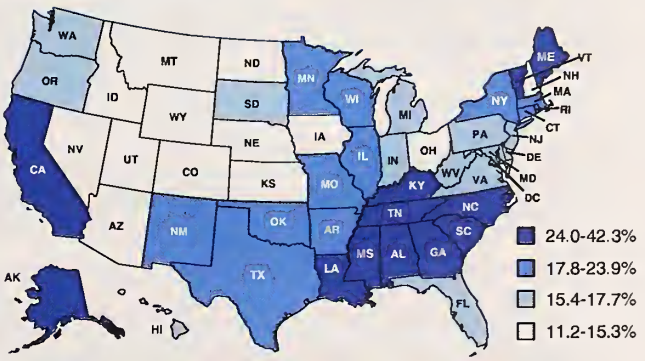
In contrast to the proportion of Medicaid enrollees who are duals, the percentage of *Medicare* enrollees who are duals reflects, within a state, the portion of the aged and disabled population with low income and few assets (Figure 3.7). A relatively high Medicaid eligibility income threshold in a state can also result in high dual enrollment among Medicare beneficiaries. For example, Maine had waivers in place in 2002 to provide pharmacy-only Medicaid coverage to most aged and disabled enrollees up to 300 percent of the federal poverty level.

Figure 3.6
Percentage of Medicaid Enrollees (in Quartiles) Who Were Duals in 2002



Source: Medicaid Analytic Extract, 2002.
Dual = ever enrolled in both Medicare and Medicaid in 2002.

Figure 3.7
Percentage of Medicare Beneficiaries (in Quartiles) Who Were Duals in 2002



Sources: Medicaid Analytic Extract, 2002; Medicare and Medicaid Statistical Supplement, 2002. Dual = ever enrolled in both Medicare and Medicaid in 2002.

The percentage of enrollees receiving only restricted Medicaid benefits (defined as family planning only enrollees, unqualified aliens, or restricted-benefit duals) ranged from 0.0 percent in Vermont to 32.9 percent in California (Figure 3.8).[16]

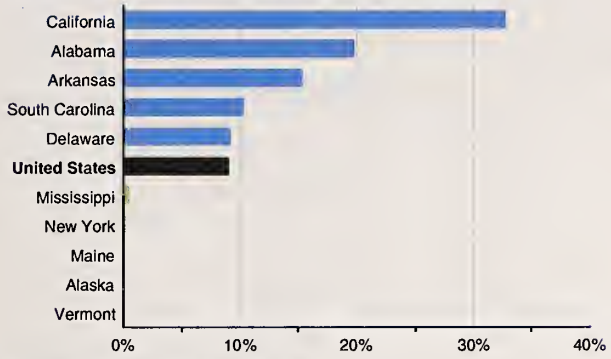
[16] Because the restricted-benefit dual population in Vermont also qualified for Pharmacy Plus prescription drug coverage, there were no restricted-benefit duals reported in the state in 2002. Other states with Pharmacy Plus programs in place in 2002 include Florida, Illinois, Maryland, and Wisconsin.

Table 3.2
Medicaid Enrollment by Basis of Eligibility (Percentage of Enrollees) in 2002

	Children	Adults	Aged	Disabled	Aged or Disabled
United States	**49.2**	**25.9**	**9.3**	**15.6**	**24.9**
Alabama	49.2	16.3	12.0	22.5	34.5
Alaska	63.6	20.8	5.4	10.2	15.5
Arizona	47.6	37.5	5.0	10.0	14.9
Arkansas	50.9	22.6	7.8	18.7	26.5
California	38.7	43.6	7.1	10.6	17.7
Colorado	54.2	20.2	10.8	14.9	25.6
Connecticut	53.5	21.4	12.7	12.4	25.1
Delaware	44.6	36.1	7.4	11.9	19.3
District of Columbia	50.6	23.4	6.9	19.1	26.0
Florida	51.0	19.9	9.5	19.7	29.2
Georgia	57.5	16.8	8.4	17.3	25.7
Hawaii	45.8	32.9	10.0	11.3	21.3
Idaho	64.6	15.3	6.4	13.7	20.1
Illinois	53.8	18.1	13.7	14.5	28.2
Indiana	59.9	17.5	8.7	13.9	22.6
Iowa	51.9	19.7	11.0	17.4	28.4
Kansas	56.5	15.9	10.7	17.0	27.7
Kentucky	48.7	14.4	9.4	27.6	36.9
Louisiana	61.6	10.8	10.2	17.4	27.6
Maine	29.1	19.0	20.6	31.4	52.0
Maryland	55.7	21.0	7.8	15.4	23.3
Massachusetts	40.1	29.6	9.5	20.8	30.3
Michigan	54.6	19.4	6.8	19.1	26.0
Minnesota	50.5	22.7	13.0	13.8	26.8
Mississippi	54.6	12.0	10.9	22.5	33.4
Missouri	53.5	23.4	9.1	14.1	23.1
Montana	53.0	20.8	9.3	16.9	26.2
Nebraska	60.7	19.2	8.8	11.3	20.1
Nevada	53.8	21.7	9.2	15.4	24.5
New Hampshire	61.4	14.1	11.2	13.2	24.4
New Jersey	49.5	20.9	11.3	18.4	29.6
New Mexico	62.7	20.3	5.1	11.9	17.0
New York	42.1	33.5	9.1	15.4	24.4
North Carolina	51.4	18.8	12.6	17.2	29.9
North Dakota	47.0	25.6	13.9	13.6	27.4
Ohio	53.7	21.6	8.0	16.7	24.6
Oklahoma	65.0	13.7	9.2	12.1	21.3
Oregon	40.9	40.9	7.4	10.9	18.2
Pennsylvania	48.2	16.6	12.4	22.7	35.1
Rhode Island	45.8	25.3	9.7	19.1	28.8
South Carolina	52.3	24.2	9.3	14.2	23.5
South Dakota	60.8	15.9	8.9	14.4	23.3
Tennessee	43.5	29.6	7.7	19.2	26.9
Texas	59.8	16.7	11.6	12.0	23.6
Utah	56.7	26.7	5.0	11.5	16.6
Vermont	43.8	31.4	12.5	12.3	24.7
Virginia	54.4	13.3	13.2	19.1	32.3
Washington	53.7	26.1	7.1	13.0	20.2
West Virginia	50.4	16.2	7.9	25.5	33.5
Wisconsin	44.8	24.0	13.8	17.4	31.2
Wyoming	61.8	18.0	7.6	12.6	20.2

Source: Medicaid Analytic Extract, 2002.

Figure 3.8
Percentage of Enrollees Receiving Only Restricted Medicaid Benefits in 2002: Top and Bottom 5 States



Source: Medicaid Analytic Extract, 2002.

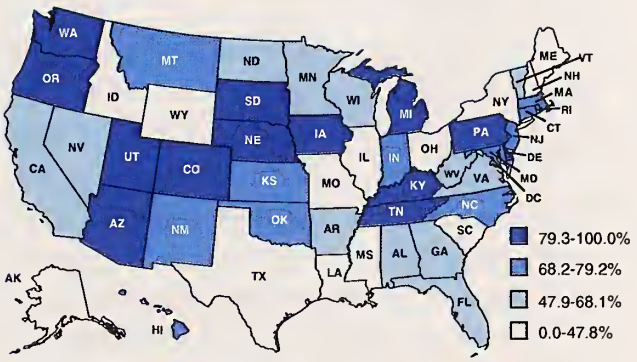
The high number of restricted-benefit enrollees in three states skewed the national average. California, Alabama, and Arkansas each had extensive family planning only programs: 23.5 percent of enrollees in California, 12.5 percent of enrollees in Arkansas, and 10.6 percent of enrollees in Alabama were enrolled in such programs. In addition, 9.4 percent of enrollees in California were unqualified aliens, and 9.1 percent of enrollees in Alabama were restricted-benefit duals. In contrast, there were a number of states—Vermont, Alaska, Maine, New York, and Mississippi—in which less than 1 percent of all Medicaid enrollees received only restricted Medicaid benefits in 2002. (See Appendix Table A3.10 for additional state-level details.)

Managed Care

As described in Chapter 2, managed care plans range from comprehensive HMOs and HIOs, which provide most care used by enrollees, to PCCM plans that provide only case management services. PHPs typically cover a selected set of services such as dental or behavioral health care.

Managed care enrollment varied widely across states in 2002. In some states (Michigan and South Dakota) all enrollees were in some type of managed care in 2002, whereas in others (Alaska and Wyoming) no one was enrolled in managed care plans during 2002 (Figure 3.9 and Appendix Table A3.11). Furthermore, the type of managed care enrollment often differs between states. In Michigan, almost 67 percent of enrollees were in comprehensive HMO/HIO plans. In South Dakota, the only other state in which all Medicaid enrollees were in some type of prepaid plan, managed care was limited to prepaid dental plans and PCCMs.

Figure 3.9
Percentage (in Quartiles) Ever Enrolled in Managed Care in 2002



Sources: Medicaid Analytic Extract, 2002.

Table 3.3 shows the top 10 states in the percentage ever enrolled in an HMO or HIO. Variation across states in enrollment in Medicaid HMO/HIO plans is of particular importance because it has implications for Medicaid utilization and expenditure analyses using MAX. Claims for capitated services, called encounter claims, are incomplete in the MSIS and MAX data systems. Because HMO/HIO enrollees typically have most of their medical care covered under a capitated payment, only limited service use information is available for these people. Tennessee, the top state in the percentage enrolled in HMOs or HIOs (93.4 percent), is an exception. As of July of 2002, Tennessee began making FFS payments to its managed care plans, and as a result, MAX FFS claims data for HMO/HIO enrollees are fairly extensive in Tennessee during the second half of the year.

Table 3.3
Percentage Enrolled in Medicaid Managed Care in 2002, by Type of Plan: Top 10 States

Ever Enrolled in HMO/HIO		Ever Enrolled in PHP Only or PHP and PCCM Only		Ever Enrolled in PCCM Only	
State	**Percentage**	**State**	**Percentage**	**State**	**Percentage**
Tennessee	93.4	South Dakota	100.0	Montana	70.8
Arizona	82.3	Kentucky	72.5	North Carolina	67.7
Delaware	79.7	Nebraska	63.5	Vermont	67.6
Hawaii	77.5	Alabama	61.8	North Dakota	63.9
Rhode Island	73.7	Iowa	58.2	Georgia	63.8
Maryland	73.6	Washington	45.0	Arkansas	54.0
Connecticut	70.5	Colorado	39.9	Idaho	47.1
Pennsylvania	69.5	Massachusetts	37.9	Mississippi	46.1
New Mexico	68.2	Utah	34.1	Kansas	39.7
District of Columbia	68.1	Michigan	33.4	Maine	39.3
United States	**38.3**	**United States**	**12.3**	**United States**	**10.4**

Source: Medicaid Analytic Extract, 2002.

Some states had few enrollees in HMOs/HIOs, but had high enrollment in PHP or PCCM plans. The five states with highest PHP-only or PHP-and-PCCM-only enrollment reflect the range of PHP plans available across states: South Dakota's PHP is a dental plan, Kentucky's PHP provides transportation benefits, Nebraska's and Iowa's PHPs are behavioral health plans, and Alabama's "PHP Network" provides only inpatient care for persons who do not have Medicare Part A coverage. Another example of a PHP type is Oklahoma's hybrid PHP/PCCM plans that cover only case management and some office procedures and lab work.

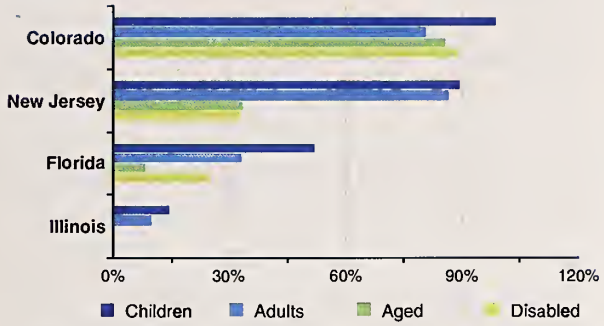
In six states, over half of enrollees were enrolled in only PCCM plans: Montana, North Carolina, Vermont, North Dakota, Georgia, and Arkansas. (See Appendix Table A3.14 and Chapter 4 for additional information about managed care enrollment by type of plan by state.)

As discussed in Chapter 2, people may selectively enroll in managed care based on their demographic characteristics and health status. Also, states may enroll certain groups of enrollees into mandatory managed care under Section 1915(b) waivers. As a result, FFS utilization and expenditures examined in this chartbook reflect a selective portion of Medicaid enrollees in each state. About 60 percent of children, but only 46.1 of adults, 41.7 percent of disabled, and 28.5 percent of aged enrollees, were enrolled in either an HMO/HIO or PHP in 2002.

These national averages mask substantial variation in the composition of managed care enrollees between states. Figure 3.10 shows variation in HMO/HIO and PHP enrollment in four select states—Colorado, New Jersey, Florida, and Illinois—by basis of eligibility. While each state is unique in the demographics of its managed care enrollees, the figure illustrates a pattern evident in many states: HMO/HIO and PHP enrollment is typically highest among children and is often much lower among aged and disabled enrollees.[17] (See Appendix Table A3.13 for additional state-level detail.)

[17] Because covered services vary greatly between HMOs/HIOs and PHP plans, we would prefer to compute managed care enrollment by basis of eligibility separately for each plan type. While such analyses are possible using MAX data, they were not possible with the MAX validation tables used as our source summary data files (see Source Data Used in This Chartbook in Chapter 1).

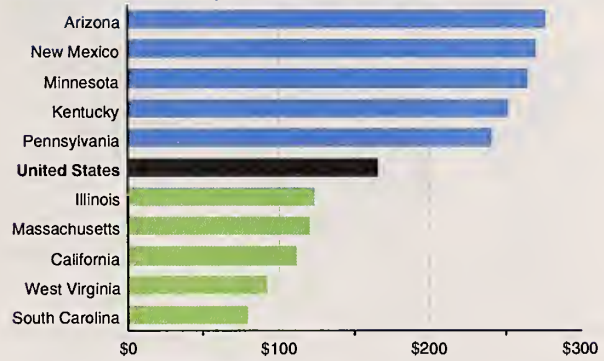
Figure 3.10
Percentage Ever Enrolled in HMO/HIO or PHP in 2002 in Select States, by Basis of Eligibility



Source: Medicaid Analytic Extract, 2002.
HMO/HIO = health maintenance organization or health insuring organization.
PHP = prepaid health plan.

Capitated payments per person per month enrolled in HMO/HIO ranged from $80 in South Carolina to $277 in Arizona (Figure 3.11 and Chapter 4). States with the highest capitated payments, like Arizona, tended to have a higher percentage of duals enrolled in managed care and lower than average FFS spending among managed care enrollees.

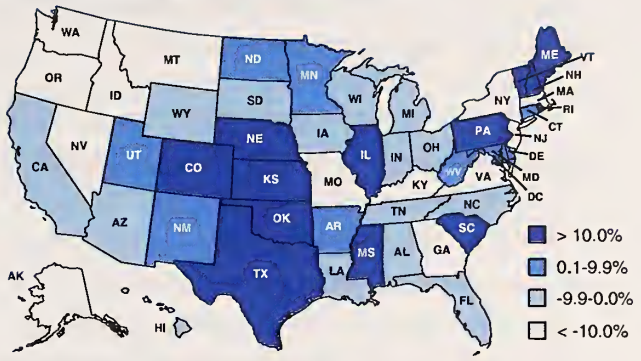
Figure 3.11
Capitated Payments per Person per Month Enrolled in HMO/HIO in 2002: Top and Bottom 5 States



Source: Medicaid Analytic Extract, 2002.
HMO/HIO = health maintenance organization or health insuring organization.

Between 1999 and 2002, the rate of enrollment in HMOs/HIOs increased in about half the states and remained constant or declined in the others (Figure 3.12). Enrollment in HMOs/HIOs generally regressed to the mean such that on average, the national rate of enrollment remained the same.

Figure 3.12
Growth in HMO/HIO Enrollment, 1999-2002



Sources: Medicaid Analytic Extract, 1999-2002.
HMO/HIO = health maintenance organization or health insuring organization.

States with the highest increase in HMO/HIO enrollment typically had a lower than average percentage enrolled in managed care in 1999. In the four states with declines in HMO/HIO enrollment between 1999 and 2002 (New Mexico, Oregon, Vermont, and Washington), over half were enrolled in such plans in 1999. (See Appendix Table A3.12 for more state-level detail.)

Service Utilization and Expenditures Among Full-Benefit Enrollees

State-level summaries of Medicaid service utilization and expenditures highlight the variation in Medicaid coverage and the variation in the composition of Medicaid enrollees across states. Because restricted-benefit enrollees receive such limited Medicaid services and skew both utilization and cost estimates, we exclude them from these analyses to make states more comparable.

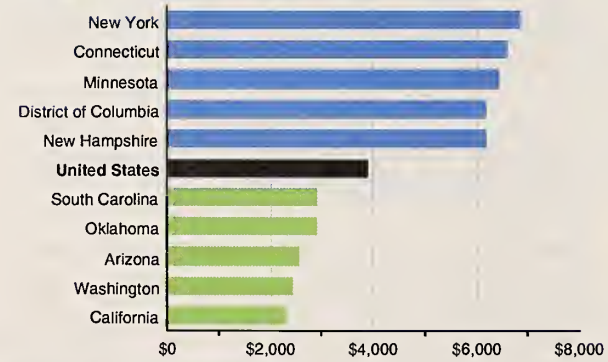
Expenditures for all full-benefit Medicaid enrollees exceeded $208 billion in 2002.[18] States with the highest total Medicaid expenditures corresponded directly with those that had the largest number of

[18] Expenditures for restricted-benefit enrollees totaled 2.6 billion in 2002.

Medicaid enrollees—California, New York, and Texas alone accounted for 31.2 percent of all full-benefit enrollee Medicaid costs in 2002.

New York's expenditures exceeded those of all other states, overall ($31 billion) as well as per enrollee ($6,869) (Figure 3.13). As shown in Table 1.1 of Chapter 1, New York's Medicaid program covered several optional services that were not included in many state programs. Also among the top 5 in per-enrollee costs were Connecticut ($6,607), Minnesota ($6,455), and New Hampshire ($6,206), each of which had higher than average percentage of elderly in its Medicaid population, and the District of Columbia ($6,210), which had a higher than average percentage of disabled enrollees.

Figure 3.13
Per-Enrollee Medicaid Expenditures Among Full-Benefit Enrollees in 2002: Top and Bottom 5 States



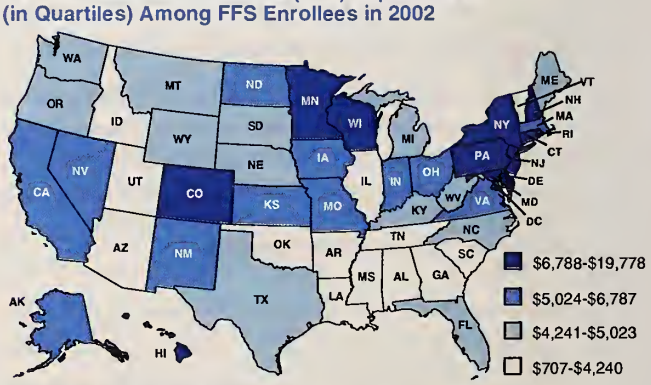
Source: Medicaid Analytic Extract, 2002.

States with the lowest per-enrollee costs were California ($2,315), Washington ($2,448), Arizona ($2,598), Oklahoma ($2,919), and South Carolina ($2,920). Each of these states had higher percentages of typically less expensive child and adult enrollees. Lower costs were also associated with less expansive Medicaid programs. Oklahoma, for example, did not cover some optional home health services (audiology, occupational therapy, physical therapy, or speech and language therapy) that were covered in each of the five highest-cost states in 2002.

FFS expenditures represented about 84 percent of all full-benefit enrollee Medicaid costs in 2002 and a majority of expenditures in all states except Arizona. Only 15.0 percent of expenditures went to FFS payments in Arizona, compared with 53.5 percent in New Mexico, 56.2 percent in Pennsylvania, and 59.7 percent in Oregon, the next three lowest states (see Appendix Table A3.15).

On average, $5,570 was spent per FFS enrollee in 2002.[19] Expenditures for such enrollees ranged widely, from $708 in Tennessee to $19,778 in Connecticut (Figure 3.14). In both these states, a majority of enrollees were in HMOs/HIOs at some point in the year so that only a relatively small subset of enrollees is represented by the average FFS expenditure measures.

Figure 3.14
Per-Enrollee Fee-for-Service (FFS) Expenditures (in Quartiles) Among FFS Enrollees in 2002



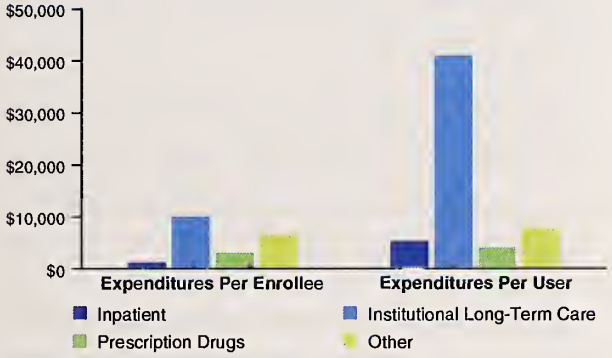
Sources: Medicaid Analytic Extract, 2002.
FFS Enrollees = full-benefit enrollees not enrolled in HMOs/HIOs in 2002.

In Connecticut, for example, almost all children and adults were in HMOs/HIOs, so that most FFS care was for aged and disabled enrollees. The high average FFS costs in Connecticut were accounted for by

[19] FFS enrollees include only enrollees who received full benefits and who never enrolled in an HMO or HIO in 2002. See Chapter 2 for details.

particularly high FFS expenditures for institutional long-term care, prescription drugs, and "other" (OT) services.[20] Figure 3.15 shows average expenditures per enrollee and per user of service in Connecticut.

Figure 3.15
Per-Enrollee Fee-for-Service (FFS) Expenditures Among FFS Enrollees in Connecticut in 2002, by Type of Service



Source: Medicaid Analytic Extract, 2002.

While expenditures per user of prescription drugs were higher in Connecticut ($3,602) than in any other state, FFS expenditures per user of institutional long-term care were higher than in Connecticut in five states—Alaska, New York, the District of Columbia, Delaware, and Rhode Island—and higher for OT services in Minnesota and Delaware (Table 3.4). In all these states but Alaska, over 25 percent of all enrollees were in HMOs or HIOs in 2002, so FFS expenditures per enrollee or per user reflected only a selected portion of each state's Medicaid population. In general, most states with high costs per user or per enrollee had extensive managed care plans, leading to selective FFS enrollee subgroups. In each of the 10 states with the highest prescription drug expenditures per user, over 50 percent of full-benefit enrollees were in HMOs/HIOs.

[20] OT services include community long-term care services; physician and other ambulatory services; and lab, X-ray, supplies, and other wraparound services.

Table 3.4
Per-User FFS Expenditures Among FFS Enrollees, by Type of Service: Top 10 States

Inpatient		Institutional Long-Term Care		Prescription Drugs		Other Services	
State	**Dollars**	**State**	**Dollars**	**State**	**Dollars**	**State**	**Dollars**
DC**	15,843	Alaska	53,569	Connecticut**	3,602	Minnesota**	9,267
Maine	13,545	New York*	52,478	New Jersey**	3,182	Delaware**	7,860
New York*	11,057	DC**	47,711	Delaware**	3,067	Connecticut**	7,653
Alaska	10,075	Delaware**	46,006	Maryland**	2,888	DC	6,056
Washington**	9,935	Rhode Island**	42,543	Rhode Island**	2,781	New Jersey**	5,984
Maryland**	9,124	Connecticut**	40,718	DC**	2,622	Maryland**	5,453
Illinois	9,013	New Jersey**	38,247	Hawaii**	2,333	New York*	5,042
Nevada**	7,886	Maryland**	36,725	Minnesota**	2,282	Rhode Island**	4,945
California**	7,651	Ohio*	34,515	California**	2,060	Maine	4,697
Wisconsin**	7,637	Pennsylvania**	33,970	Pennsylvania**	2,000	New Hampshire	4,554
United States	**5,767**	**United States**	**30,367**	**United States**	**1,434**	**United States**	**2,689**

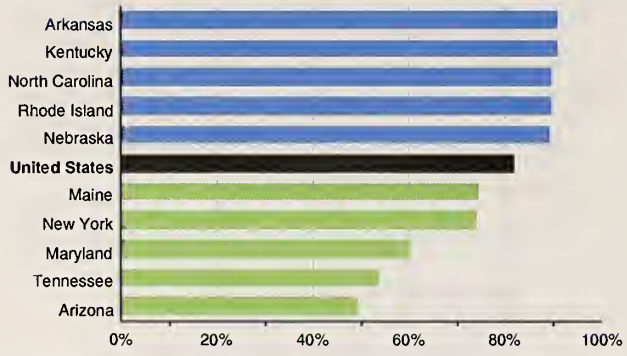
Source: Medicaid Analytic Extract, 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

Compared with expenditures per enrollee and per user, the percentage utilizing services varied less widely across states. Over 82 percent of all FFS enrollees used at least one Medicaid service in 1999. With the exceptions of Arizona, Tennessee, and Maryland—states in which over half of full-benefit enrollees were in managed care—the utilization rate ranged from 74.4 percent in New York to 91.3 percent in Arkansas (Figure 3.16).

Figure 3.16
Percentage of Fee-for-Service (FFS) Enrollees Using Services in 2002: Top and Bottom 5 States



Source: Medicaid Analytic Extract, 2002.
FFS Enrollees = full-benefit enrollees not enrolled in HMOs/HIOs in 2002.

Detailed information about FFS utilization and expenditures among FFS enrollees is available for each state in appendix tables A3.15 through A3.29 by basis of eligibility and type of service. As made clear in this chapter, both utilization and expenditures captured in FFS claims records are greatly influenced by the rate of capitated managed care enrollment in a state. In the appendix tables, states with high HMO/HIO enrollment are identified by asterisks, as in Table 3.4. Enrollee composition, managed care enrollment, and state variation in service coverage, as well as state anomalies, should be taken into account when interpreting the statistics reported in the appendix.

In addition to the appendix tables for this chapter, additional information about utilization and expenditures by state can be found for dual enrollees in Chapter 5 and by detailed type of service in Chapter 6.

4. Special Topic: Managed Care

In Chapters 2 and 3, we provided summary enrollment and expenditure information for managed care enrollees nationally and across states. MAX data can be used to examine patterns of managed care enrollment in much more detail than shown in Chapters 2 and 3. For example, MAX can be used to examine concurrent enrollment in multiple types of managed care plans, the duration of managed care enrollment, and enrollment differences by subgroup. In this chapter, we provide limited supplementary information about managed care enrollees that gives a taste of the types of analyses that are possible with MAX data.

Managed care plays an important role in Medicaid. As presented in Chapter 2, a majority (61 percent) of the Medicaid population enrolled in some type of prepaid plan in 2002, although this ranged widely across states, from no enrollees in Alaska and Wyoming to all enrollees in Michigan and South Dakota (see Chapter 3 and Appendix Table A3.11). Medicaid capitated payments for these plans totaled $33.2 billion in 2002, representing 15.8 percent of expenditures for all enrollees (16.0 percent of expenditures for full-benefit enrollees).

Managed care plans differ greatly in the breadth of services they cover. HMOs and HIOs typically provide relatively comprehensive care for their enrollees, whereas PHPs usually cover a limited set of services, such as behavioral health or dental care, and PCCMs provide only case management. As a result, information about the characteristics of utilized managed care plans is crucial for understanding the role of managed care within a population. For example, while both Michigan and South Dakota had high managed care enrollment in 2002, most Medicaid enrollees in Michigan (67 percent) were enrolled in comprehensive managed care plans (HMOs or HIOs), whereas in South Dakota all managed care enrollment was limited to prepaid dental and PCCM plans. (See appendix tables A3.11-A3.14 for details.)

Expenditures for capitated payments also vary greatly across states; they depend on the characteristics of utilized plans as well as the characteristics of people enrolled in such plans. As reported in Chapter 2, enrollment in managed care is highest among children and adults, who typically have lower health care expenditures than disabled or elderly Medicaid enrollees. Nationally, 60.0 percent of child enrollees and 46.1 percent of adult enrollees were enrolled in an HMO, HIO, or PHP in 2002, compared with 41.7 percent of disabled and only 28.5 percent of aged enrollees. As a result, capitated payments typically represent a disproportionately small share of total Medicaid expenditures.

In this chapter we present information about managed care plan enrollment combinations and total and average capitated payments by type of plan. We

also present a summary of FFS expenditures for people ever enrolled in HMOs/HIOs in 2002.

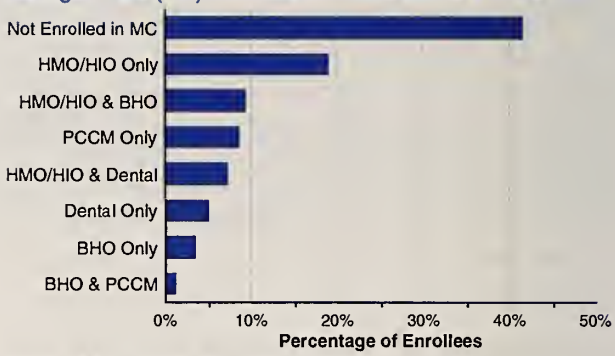
In reviewing summary managed care statistics, it is important to keep in mind that claim records for services used under managed care, called encounter records, are limited in their scope (they contain utilization but no expenditure information) and are not always complete. Therefore, in this chapter, managed care plan enrollment and payment information reflects data for capitated payments only. The supplementary FFS information for HMO/HIO enrollees reflects services received outside managed care.

Managed Care Enrollment Combinations in June 2002

People can enroll in more than one type of prepaid plan. When behavioral health services, for example, are "carved out" of traditional HMOs, a person can be enrolled in both an HMO and a behavioral health organization (BHO), which is a form of PHP. BHOs can also be stand-alone prepaid plans for people receiving primarily FFS care. Similarly, dental plans and other PHPs can be used alone or in combination with other types of managed care plans.

Figure 4.1 shows the eight most common combinations of prepaid plans in Medicaid in June of 2002. Nationally, 41.7 percent of enrollees were not enrolled in any type of managed care, 19.1 percent were enrolled in an HMO/HIO only, 9.4 percent were enrolled in an HMO/HIO and a BHO, and 8.7 percent were enrolled in PCCM plans only. Other common managed care combinations were HMO/HIO and dental PHP (7.3 percent), dental only (5.1 percent), BHO only (3.5 percent), and BHO and PCCM plans (1.4 percent).

Figure 4.1
Managed Care (MC) Enrollment Combinations in June 2002



Source: Medicaid Analytic Extract, 2002.
BHO = behavioral health organization; HMO/HIO = health maintenance organization or health insuring organization; PCCM = primary care case management.

Enrollment in plan combinations varied greatly across states. For example, all enrollees in Tennessee were enrolled in HMOs/HIOs and BHOs. This managed care combination was evident in only 10 other states: about half of all Medicaid enrollees in Pennsylvania (59.4 percent), Michigan (57.9 percent), Utah (56.1 percent), Washington (47.8 percent), and Colorado (44.6 percent) were enrolled in both an HMO/HIO and a BHO. A smaller portion of Medicaid enrollees were in this managed care combination in Iowa (21.3 percent), Nebraska (14.9 percent), Texas (4.4 percent), Hawaii (1.5 percent), and Oregon (1.2 percent).

Only five additional states had any other BHO plan enrollment. With the exception of Massachusetts, BHO enrollment in these states was very small (under 4 percent). In Massachusetts, 39.1 percent of all Medicaid enrollees were enrolled in both BHO and PCCM plans, and another 2.1 percent were in BHOs only.

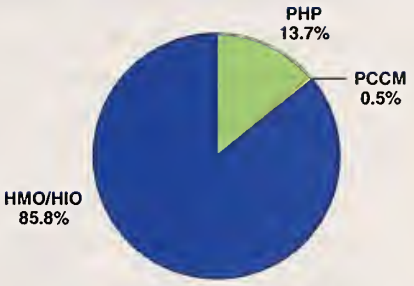
Dental plans were carved out of HMO/HIO plans or available as stand-alone dental plans for FFS enrollees in only four states in June of 2002—California, Michigan, Oregon, and South Dakota. In California, 39.8 percent of enrollees were enrolled in HMO/HIO

and dental plans, while 27.5 percent were enrolled in dental plans only. Because California's population is so large, it alone accounted for 99.4 percent of the 3 million enrollees in combination HMO/HIO and dental plans and 97.9 percent of the 2.1 million enrollees in stand-alone dental plans. For more detail about managed care enrollment combinations by state, see Appendix Table A4.1.

Capitated Payments by Type of Plan

Medicaid paid $33.2 billion in capitated payments to managed care organizations in 2002. Almost 86 percent of the $33.2 billion was for enrollment in HMOs/HIOs, 13.7 percent was for PHP plans, and 0.5 percent was spent on PCCM plans (Figure 4.2). The distribution of payments reflects the cost of services typically covered by each type of plan. Average monthly payments for persons enrolled in a plan were $166 for HMOs/HIOs, $33 for PHPs, and only $3 for PCCM plans (Table 4.1).

Figure 4.2
Composition of Medicaid Capitated Payments in 2002



Total Expenditures = $33.2 Billion

Source: Medicaid Analytic Extract, 2002.
HMO/HIO = health maintenance organization or health insuring organization.
PCCM = primary care case management.
PHP = prepaid health plan.

There was substantial variation in average premium payments across states. Payments for PHPs, in particular, differed greatly by state, reflecting considerable variation in the breadth and depth of services covered by PHPs. Expenditures for PHPs ranged from less than $5 per person per month in Delaware for a transportation benefit to $2,851 per person per month in New York. New York was one of two

Table 4.1
Capitated Payments Per Person Per Month in Managed Care in 2002, by Type of Plan: Top 10 States

Comprehensive Managed Care (HMO/HIO)		Prepaid Health Plan (PHP)		Primary Care Case Management (PCCM)	
State	Dollars	State	Dollars	State	Dollars
Arizona	277	New York	2,851	Arkansas	13
New Mexico	271	Wisconsin	2,404	Oregon	5
Minnesota	266	Arizona	449	Vermont	5
Kentucky	252	Hawaii	225	Kentucky	4
Pennsylvania	242	Illinois	143	Idaho	4
Virginia	220	Pennsylvania	102	Georgia	3
District of Columbia	203	South Carolina	72	North Carolina	3
Oregon	202	Alabama	61	Florida	3
Maryland	195	Massachusetts	58	Alabama	3
Colorado	186	Oregon	52	Mississippi	3
United States	**166**	**United States**	**33**	**United States**	**3**

Source: Medicaid Analytic Extract, 2002.

states in which a small number of people enrolled in expensive PHP plans such that the national average was skewed upward to $33. In New York, only 0.2 percent of enrollees were enrolled in PHPs, but these included behavioral health plans and Programs of All-Inclusive Care for the Elderly (PACE) at the cost of $2,851 per person per month; in Wisconsin, 2.1 percent of the state's Medicaid enrollees were enrolled in Milwaukee's "Independent Care Plan," at the cost of $2,404 per person per month.[21]

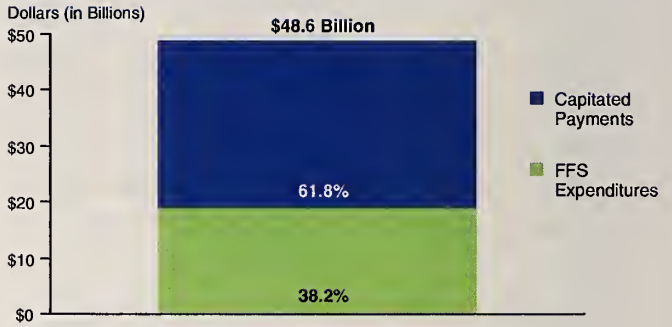
In comparison with PHPs, capitated payments per person per month in HMOs/HIOs averaged $166 nationally and ranged from $80 in South Carolina to $277 in Arizona. Payments for PCCM plans ranged from $1 to $5 in all states except Arkansas, whose average PCCM payments of $13 per month covered case management for children enrolled in ARKids.

FFS Expenditures Among People Enrolled in HMOs/HIOs

People ever enrolled in comprehensive managed care plans (HMOs/HIOs) in 2002 incurred a total of $48.6 billion in Medicaid expenditures. While most of their costs were for managed care capitated payments, a significant portion, 38.2 percent, was paid by FFS (Figure 4.3). Because HMO/HIO enrollees are excluded from most FFS expenditure summary statistics presented in this chartbook, we provide some information about their FFS costs in this section.

[21] Milwaukee's plan provides medical and social services to people with physical, developmental, or emotional disabilities and is coded as an "other" type of PHP plan in the MAX person summary file. Plans coded as "other" are identified in MAX eligibility anomaly notes available on the MAX website (see end of Chapter 1 for web link).

Figure 4.3
Composition of Expenditures Among HMO/HIO Enrollees in 2002

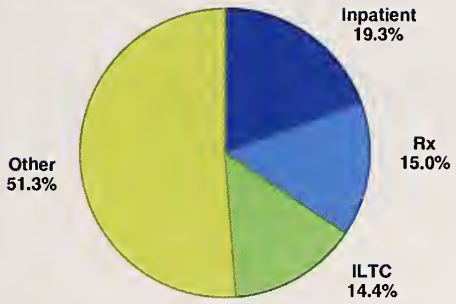


Source: Medicaid Analytic Extract, 2002.
FFS = fee-for-service.
HMO/HIO = health maintenance organization or health insuring organization.

As discussed in Chapter 2, there are two key reasons why people enrolled in HMOs or HIOs at some point in 2002 might have FFS expenditures. First, some Medicaid enrollees may be in managed care for a limited number of months during the year but use health care services covered by FFS during other months of the year. Second, HMOs and HIOs do not always cover all Medicaid services. For example, dental care, behavioral health care, long-term care, prescription drugs, and other services may not be included in the HMO or HIO capitated rate.

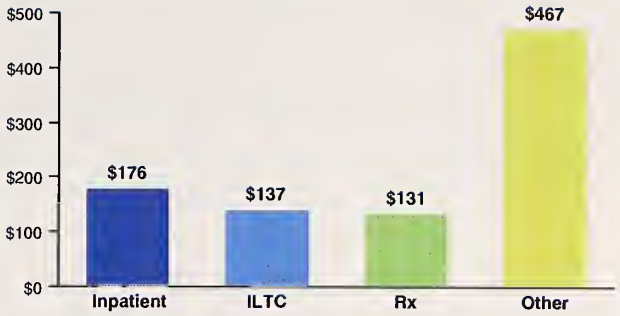
On average, about $911 was spent in FFS payments for each HMO/HIO enrollee in 2002. The FFS services used most by HMO/HIO enrollees were "other" (OT) services, including home- and community-based long-term care; physician and other ambulatory services; lab, X-ray, and other services. These services accounted for over half of all FFS expenditures among HMO/HIO enrollees (Figure 4.4). Another 19.3 percent of their FFS costs were for inpatient care, 15.0 percent were for prescription drugs, and 14.4 percent were for institutional long-term care.

Figure 4.4
Composition of Fee-for-Service Expenditures Among HMO/HIO Enrollees in 2002



Source: Medicaid Analytic Extract, 2002.
HMO/HIO = health maintenance organization or health insuring organization; ILTC = institutional long-term care; Rx = prescription drugs.

Figure 4.5
Per-Enrollee Fee-for-Service Expenditures Among HMO/HIO Enrollees in 2002, by Type of Service



Source: Medicaid Analytic Extract, 2002.
HMO/HIO = health maintenance organization or health insuring organization; ILTC = institutional long-term care; Rx = prescription drugs.

FFS expenditures per enrollee in an HMO or HIO were correspondingly highest for OT services ($467), followed by inpatient ($176), institutional long-term care ($137), and prescription drugs ($131) (Figure 4.5). This pattern of expenditures by type of services was evident in most states with managed care enrollment, which suggests that some OT services were often not covered under HMO/HIO plans. Alternatively, people enrolled in HMOs/HIOs at some point in the year may have had months of non-managed care enrollment when these services were used.

Additional information about FFS payments by state for Medicaid enrollees in HMO/HIO plans is available in Appendix Table A4.3. Readers can find additional summary statistics in the Medicaid Managed Care Enrollment Report, which is published June 30 of each year and can be accessed at the following website: www.cms.hhs.gov/MedicaidDataSources GenInfo/04_MdManCrEnrllRep.asp.

5. Special Topic: Dual Enrollees

Dual enrollees are aged and disabled Medicaid enrollees who qualify for health insurance benefits through both Medicare and Medicaid. Duals are among the most vulnerable populations served by Medicare and Medicaid and among the costliest users of health care in the United States (MedPac 2004). Average health care costs for duals are double those of other Medicare beneficiaries and approximately eight times higher than those of low-income children covered by Medicaid (Kaiser Commission on Medicaid and the Uninsured 2004). The availability of monthly Medicare enrollment information in the MAX data system enables researchers to conduct in-depth analyses of Medicaid service use among this costly subgroup of enrollees.

In recent years, state Medicaid programs have become increasingly concerned about the growing cost of serving duals. Medicaid expenditures for duals have been rising partly due to the shift in medical use away from Medicare-covered hospitalizations to greater reliance on prescription drug therapies, which Medicaid covered for duals prior to 2006 (Ku 2003). This pattern may change now that the responsibility of providing drug coverage for duals has shifted in 2006 from Medicaid to Medicare under the Medicare Prescription Drug, Improvement, and Modernization Act (MMA) of 2003 (CMS 2004). Data presented in the chartbook are from 2002, when Medicaid still covered prescription drug services for duals.

Dual enrollees must satisfy the eligibility requirements of both the Medicare and the Medicaid programs. Generally, Medicare provides basic health insurance coverage for the vast majority of aged persons as well as for disabled persons under age 65 who have received Social Security or Railroad Retirement disability benefits for at least two years. Medicare benefits are provided to these two groups, regardless of their income or assets. However, there are substantial out-of-pocket costs for Medicare beneficiaries, including premiums and cost-sharing payments, plus some uncovered services. As a result, many low-income aged and disabled Medicare beneficiaries turn to the Medicaid program to help with these expenses. In contrast to Medicare, Medicaid is a means-tested program. Aged and disabled persons can only qualify for Medicaid benefits if they meet federal and state income and resource criteria. The intersection of aged and disabled individuals eligible for both Medicare and Medicaid are called "dual enrollees" or "duals."

The majority of duals qualify for full Medicaid benefits. For these enrollees, Medicare serves as the primary payer for services covered by both programs whereas Medicaid provides "wraparound" coverage for services not covered through Medicare (such as institutional long-term care, some home health services, home- and community-based waiver services, and, before 2006, prescription drugs). Services

covered by Medicare Part A include hospitalizations, hospice care, skilled nursing facility services, and some care by home health agencies. Medicare Part B enrollment is voluntary and requires a premium, which is covered by Medicaid. Among other things, Part B usually covers physician services, inpatient and outpatient medical services, laboratory services, and some medical equipment.

For services that are covered only by Medicaid, Medicaid claim records in MAX should reflect all services delivered, and Medicaid paid amounts can be interpreted like those for other beneficiaries. For services that are covered by both Medicaid and Medicare, Medicaid payment amounts in Medicaid claim records will reflect only coinsurance and deductible amounts paid by Medicaid up to Medicaid fee schedules after Medicare has made payments up to its own coverage limits.[22] For this reason, expenditures calculated for duals for Medicare-covered services will substantially understate the total cost of care for those services. They will, however, reflect the Medicaid payments made for such services.

A smaller population of "restricted-benefit" duals does not receive the full range of Medicaid benefits. Generally, duals who only qualify for restricted Medicaid benefits have higher income and/or assets than those duals who qualify for full Medicaid benefits. For some restricted-benefit duals, Medicaid pays Part B (and Part A if necessary) Medicare premiums as well as any coinsurance and deductibles for Medicare services. However, no wraparound services, such as institutional long-term care, are provided. For other restricted-benefit duals, only the Part B premiums are covered.

[22] If Medicare has already paid more than the coverage limit specified in Medicaid fee schedules, then Medicaid's contribution is zero.

The unique characteristics of dual enrollees and their MAX records should be kept in mind when interpreting the summary enrollment, Medicaid service utilization, and expenditure statistics that are presented in this chapter on dual enrollees. MAX data anomaly reports provide additional detail regarding the completeness and limitations of MAX data records for duals. The anomaly reports are available at the MAX website (see end of Chapter 1 for web link).

Enrollment Characteristics of Dual Enrollees

There were slightly more than 8 million dual enrollees (with either full or restricted benefits) in 2002, comprising approximately 15 percent of all Medicaid enrollees that year. As shown in Table 5.1, there was significant variability across states in the percentage of enrollees who were duals in 2002, ranging from 9.1 percent in Arizona to 25.4 percent in Maine.

A greater percentage of aged than disabled enrollees were duals in 2002. Nationally, 91.8 percent of aged and 41.0 percent of disabled enrollees were dually enrolled in both Medicare and Medicaid during the year. This pattern was evident in every state—most aged enrollees and approximately 30 to 60 percent of disabled enrollees in each state were duals.

Variation in dual enrollment by basis of eligibility was more evident among disabled than aged enrollees. In all but eight states, at least 90 percent of aged enrollees were dually enrolled in Medicare and Medicaid in 2002. The percent of aged who were duals was lowest in Maine (79.7 percent) (Figure 5.1).[23]

[23] Maine implemented an 1115 Pharmacy Plus program for low-income aged and disabled with income less than 300 percent of FPL; however, program participants were not identified as duals in MAX because missing Social Security numbers prevented linkages between Medicaid and Medicare records.

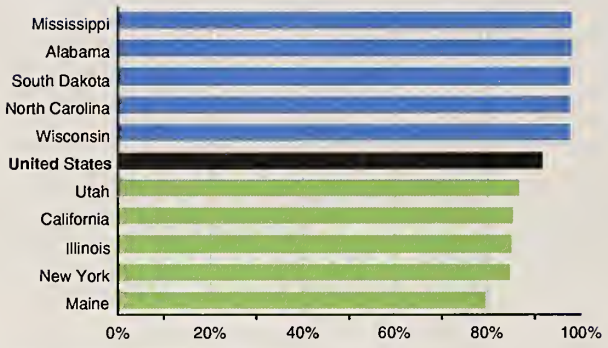
Table 5.1

Dual Enrollment in Medicare and Medicaid in 2002, by Basis of Eligibility

	Percentage of All Enrollees Who Were Duals			Number of Dual Enrollees			Percentage of Duals	
	Total	Aged	Disabled	Total	Aged	Disabled	Aged	Disabled
United States	**15.1**	**91.8**	**41.0**	**8,028,514**	**4,555,785**	**3,370,387**	**56.7**	**42.0**
Alabama	21.7	98.1	43.5	186,202	101,099	84,268	54.3	45.3
Alaska	9.3	91.0	42.3	11,564	6,091	5,356	52.7	46.3
Arizona	9.1	91.3	37.5	103,266	51,637	42,568	50.0	41.2
Arkansas	14.7	91.6	39.8	94,752	46,027	48,049	48.6	50.7
California	10.6	85.4	41.8	1,009,825	574,986	423,290	56.9	41.9
Colorado	16.1	90.9	41.8	71,944	43,767	27,804	60.8	38.6
Connecticut	18.6	92.7	51.9	92,449	58,520	31,920	63.3	34.5
Delaware	12.5	95.1	39.3	18,734	10,588	7,050	56.5	37.6
District of Columbia	12.3	88.6	30.8	18,827	9,375	8,974	49.8	47.7
Florida	17.8	90.8	46.1	487,635	236,689	248,885	48.5	51.0
Georgia	15.1	93.3	41.6	239,133	124,671	113,730	52.1	47.6
Hawaii	13.6	91.0	38.8	28,102	18,769	9,061	66.8	32.2
Idaho	11.5	97.9	37.7	22,964	12,525	10,334	54.5	45.0
Illinois	18.0	85.1	42.3	378,072	245,307	128,724	64.9	34.0
Indiana	14.7	96.0	44.5	134,833	77,138	56,616	57.2	42.0
Iowa	19.0	95.8	48.4	69,150	38,135	30,620	55.1	44.3
Kansas	17.9	96.5	44.4	55,795	32,114	23,448	57.6	42.0
Kentucky	19.5	95.8	37.7	153,609	70,799	82,059	46.1	53.4
Louisiana	15.2	95.7	30.9	158,771	102,100	56,414	64.3	35.5
Maine	25.4	79.7	26.8	91,296	58,991	30,222	64.6	33.1
Maryland	13.1	90.5	35.4	103,490	55,966	43,122	54.1	41.7
Massachusetts	18.7	90.7	47.2	226,168	104,147	118,788	46.0	52.5
Michigan	14.5	95.3	41.0	224,684	101,059	121,535	45.0	54.1
Minnesota	19.0	95.6	45.5	131,924	86,660	43,595	65.7	33.0
Mississippi	20.9	98.2	45.1	149,857	76,765	72,576	51.2	48.4
Missouri	15.0	93.9	44.5	169,094	95,953	70,543	56.7	41.7
Montana	16.9	97.3	40.9	18,333	9,854	7,512	53.8	41.0
Nebraska	14.3	94.7	51.5	38,242	22,464	15,614	58.7	40.8
Nevada	14.9	94.5	40.0	32,682	18,967	13,485	58.0	41.3
New Hampshire	18.6	93.6	55.9	22,774	12,891	9,035	56.6	39.7
New Jersey	18.4	88.4	45.1	187,354	101,621	84,529	54.2	45.1
New Mexico	9.6	95.2	39.2	44,589	22,465	21,706	50.4	48.7
New York	13.8	84.8	37.6	622,548	347,855	261,164	55.9	42.0
North Carolina	19.9	97.9	42.5	283,131	176,311	104,456	62.3	36.9
North Dakota	20.8	96.5	54.0	15,328	9,847	5,402	64.2	35.2
Ohio	13.7	92.5	36.4	250,596	135,614	111,355	54.1	44.4
Oklahoma	13.9	94.7	41.0	99,518	62,421	35,733	62.7	35.9
Oregon	12.8	97.7	47.9	82,672	46,743	33,719	56.5	40.8
Pennsylvania	18.8	93.4	31.1	325,144	201,042	122,367	61.8	37.6
Rhode Island	17.8	95.5	41.6	36,722	19,121	16,425	52.1	44.7
South Carolina	14.8	94.9	41.1	138,134	82,520	54,284	59.7	39.3
South Dakota	16.0	98.0	49.8	18,758	10,197	8,423	54.4	44.9
Tennessee	17.1	96.8	47.0	283,764	123,942	149,854	43.7	52.8
Texas	15.5	97.8	34.7	521,498	379,619	139,818	72.8	26.8
Utah	9.4	86.8	42.1	23,517	10,979	12,186	46.7	51.8
Vermont	19.3	97.4	56.2	30,585	19,236	10,917	62.9	35.7
Virginia	20.0	90.6	41.9	148,244	88,385	59,262	59.6	40.0
Washington	10.9	86.8	35.6	123,511	70,192	52,474	56.8	42.5
West Virginia	15.9	96.3	31.7	59,881	28,855	30,487	48.2	50.9
Wisconsin	22.1	97.9	47.1	179,708	109,584	66,734	61.0	37.1
Wyoming	13.1	97.9	44.2	9,141	5,182	3,895	56.7	42.6

Source: Medicaid Analytic Extract, 2002.

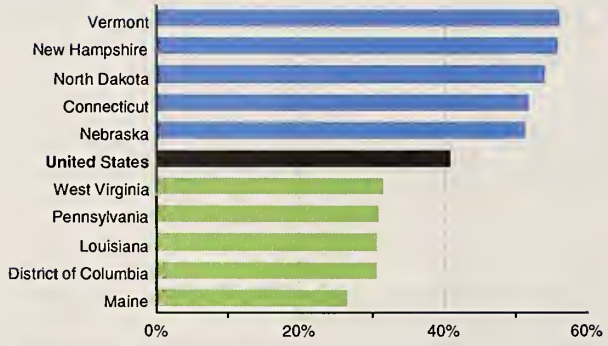
Figure 5.1
Percentage of Aged Enrollees Who Were Duals in 2002: Top and Bottom 5 States



Source: Medicaid Analytic Extract, 2002.
Dual = ever enrolled in both Medicare and Medicaid in 2002.

Among disabled enrollees, the percentage who were duals varied more widely; it ranged from 27 percent in Maine to 56 percent in Vermont and New Hampshire (Figure 5.2).

Figure 5.2
Percentage of Disabled Enrollees Who Were Duals in 2002: Top and Bottom 5 States



Source: Medicaid Analytic Extract, 2002.
Dual = ever enrolled in both Medicare and Medicaid in 2002.

Within the subgroup of duals, there were a greater number of enrollees who were aged (57 percent) than disabled (42 percent) (Table 5.2). At first glance, this difference in the make-up of duals may appear smaller than expected, since over 90 percent of aged were duals while just over 40 percent of disabled enrollees were duals in 2002. However, disabled enrollees represented a larger share of Medicaid enrollees (15.6 percent compared with 9.3 percent for the aged), which explains why the number of duals by basis of eligibility is only slightly weighted towards the aged.

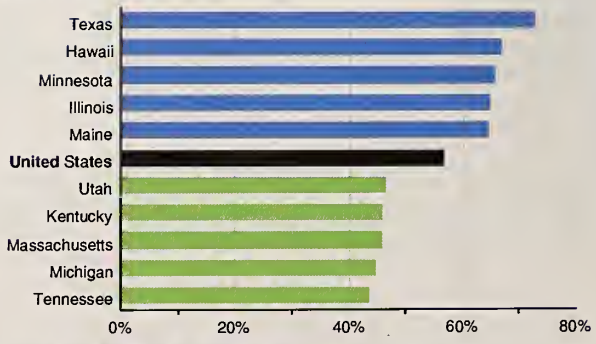
Table 5.2
Enrollment Characteristics of Individuals Ever Enrolled in Both Medicare and Medicaid in 2002

	Number	Percentage of All Duals
Total	8,028,514	100.0
Basis of Eligibility		
Aged	4,555,785	56.7
Disabled	3,370,387	42.0
Other[24]	102,342	1.3
Full Benefit Status		
Full benefits	7,100,140	88.4
Restricted benefits	928,374	11.6

Source: Medicaid Analytic Extract, 2002.

The composition of duals by basis of eligibility varied significantly across states (Figure 5.3 and Table 5.1). In Texas, aged duals outnumbered disabled duals by nearly threefold. In contrast, in the five states with the lowest percentage of aged

Figure 5.3
Percentage of Duals Who Were Aged in 2002: Top and Bottom 5 States



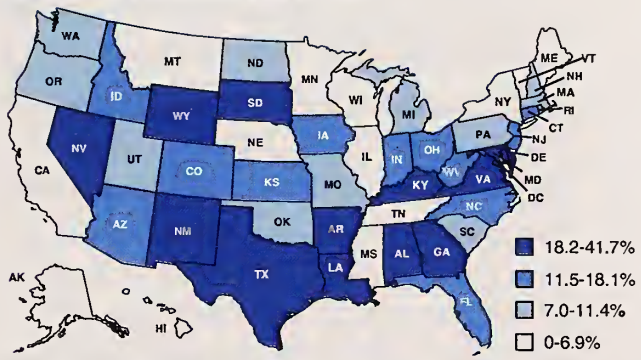
Source: Medicaid Analytic Extract, 2002.
Dual = ever enrolled in both Medicare and Medicaid in 2002.

[24] Enrollees with "other" as basis of eligibility are typically aged or disabled people that were classified as adults in Medicaid because they were caretaker relatives for dependent children.

duals—Utah, Kentucky, Massachusetts, Michigan, and Tennessee—disabled duals outnumbered aged duals. Three additional states—Arkansas, Florida, and West Virginia—also had a greater percentage of disabled than aged dual enrollees, but this difference was relatively small (2 to 3 percent).

Approximately 12 percent of all people dually enrolled in Medicare and Medicaid did not qualify for full Medicaid benefits anytime during 2002. The percentage that were restricted-benefit duals ranged from less than 7 percent in 13 states to nearly 42 percent in Alabama (Figure 5.4). In 11 states, more than a quarter of duals had restricted benefits. (See Appendix Table A5.1 for details.) Several factors could account for this variability across states. A low percentage of restricted-benefit duals may reflect a state's ability and willingness to provide full benefits to a greater percentage of its dual population. Alternatively, a high federal matching rate may enable states to cover a greater number of enrollees with full Medicaid benefits. Other political and economic factors may also limit the availability of full benefits to dual enrollees.

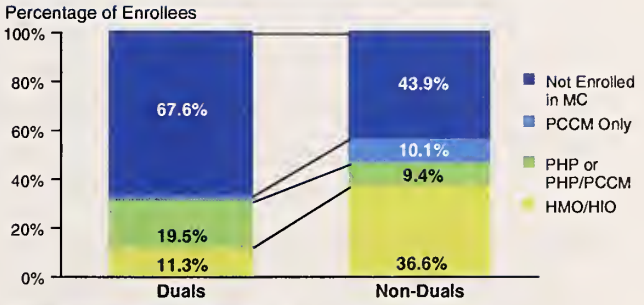
Figure 5.4
Percentage of Dual Enrollees (in Quartiles) With Restricted Medicaid Benefits in 2002



Source: Medicaid Analytic Extract, 2002.
Dual = ever enrolled in both Medicare and Medicaid in 2002.

Nationally, dual enrollees were less likely to be enrolled in Medicaid managed care than non-dual enrollees: only 32 percent of duals were enrolled in any type of Medicaid managed care compared with 61 percent of non-dual enrollees (Figure 5.5). Lower rates of managed care participation among duals relative to non-duals may reflect the difficulty of establishing risk-adjusted capitation rates for duals.

Figure 5.5
A Comparison of Managed Care (MC) Enrollment Between Dual and Non-Dual Medicaid Enrollees in 2002



Source: Medicaid Analytic Extract, 2002.
Dual = ever enrolled in both Medicare and Medicaid in 2002.
HMO/HIO = health maintenance organization or health insuring organization.
PCCM = primary care case management.
PHP = prepaid health plan.

There was wide variability across states in Medicaid managed care enrollment among duals. In some states, no duals were enrolled in managed care, while in a few states, nearly all duals were enrolled in some type of managed care (Table 5.3). In Tennessee, 94 percent of duals were enrolled in comprehensive managed care—health maintenance organizations or health insuring organizations (HMOs/HIOs). Other states with high HMO/HIO enrollment among duals included Arizona (57 percent), Utah (48 percent), and Pennsylvania (45 percent). Some states had few duals enrolled in HMO/HIO plans but had high enrollment in prepaid health plans (PHP) such as dental or behavioral health plans; these include South Dakota (100

Table 5.3
Percentage of Duals Enrolled in Medicaid Managed Care in 2002, by Type of Plan: Top 10 States

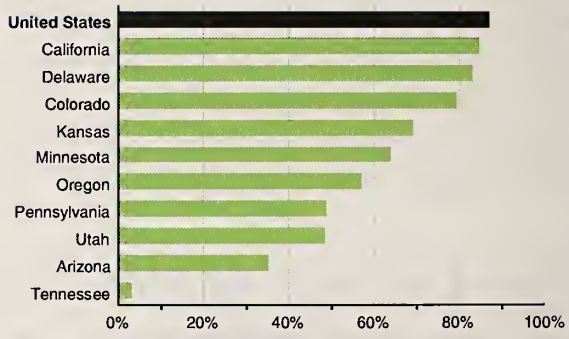
Ever Enrolled in HMO/HIO		Ever Enrolled in PHP Only or PHP/PCCM Only		Ever Enrolled in PCCM Only	
State	Percentage	State	Percentage	State	Percentage
Tennessee	94.2	South Dakota	100.0	Idaho	34.3
Arizona	56.7	Washington	99.4	Kansas	32.6
Utah	47.7	Michigan	93.2	North Carolina	17.2
Pennsylvania	45.2	California	83.8	Georgia	7.0
Oregon	38.0	Colorado	65.6	Vermont	6.4
Minnesota	33.3	Kentucky	62.0	Montana	4.0
Kansas [25]	27.0	Delaware	45.2	Florida	3.1
Colorado	16.8	Utah	39.9	West Virginia	2.9
California	15.0	Oregon	37.8	Arkansas	2.8
Delaware	10.2	Iowa	35.4	Louisiana	1.6
United States	**11.3**	**United States**	**19.5**	**United States**	**1.6**

Source: Medicaid Analytic Extract, 2002.

percent), Washington (99.4 percent), Michigan (93.2 percent), and California (83.8 percent). (See Appendix Table A5.5 for details.) Because most PHP plans only cover a limited set of services, dual enrollees in these states typically receive managed care benefits concurrently with fee-for-service benefits and are included in the subset of "fee-for-service duals" examined below. [26]

Among duals with full benefits, 87 percent were FFS duals and about 13 percent were in HMOs or HIOs. In more than half of all states, over 98 percent of full-benefit duals were in FFS. There were only 10 states with lower than average FFS enrollment among full duals, and in only 5 of these was the rate less than 50 percent (Figure 5.6).

Figure 5.6
Fee-for-Service Duals as a Percent of All Full-Benefit Duals in 2002: Bottom 10 States



Source: Medicaid Analytic Extract, 2002.
Dual = ever enrolled in both Medicare and Medicaid in 2002.

For states with the lowest FFS enrollment among full-benefit duals, particularly Tennessee and Arizona, expenditures by type of service should be interpreted with caution. Service cost information is only available in MAX for FFS enrollees. Because high-cost users may self-select themselves into either FFS or managed care, average FFS expenditures may greatly understate or overstate the true average cost of duals in these states. Meanwhile, total FFS expenditures in these states will severely understate the total cost of care for duals.

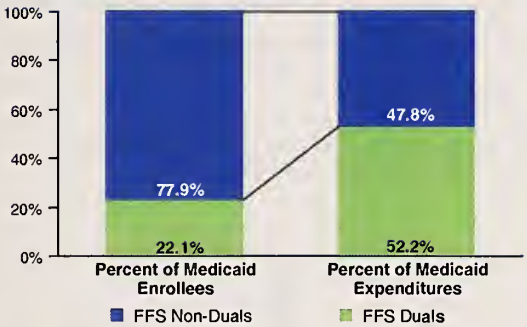
[25] In Kansas, the reported number of duals enrolled in Medicaid managed care was larger than expected. This and other unusual MAX data findings have been documented in the MAX anomaly reports (see end of Chapter 1 for web link).

[26] We define fee-for-service duals (FFS duals) as duals with full Medicaid benefits who were never enrolled in comprehensive managed care plans (HMOs/HIOs) in 2002.

Medicaid FFS Utilization and Expenditures Among FFS Duals

The total fee-for-service (FFS) expenditures for FFS duals in 2002 was approximately $81.5 billion. Duals represented 22 percent of all FFS Medicaid enrollees but accounted for nearly 52 percent of Medicaid FFS expenditures in 2002 (see Figure 5.7). This is consistent with research suggesting that duals require extensive and costly medical care.

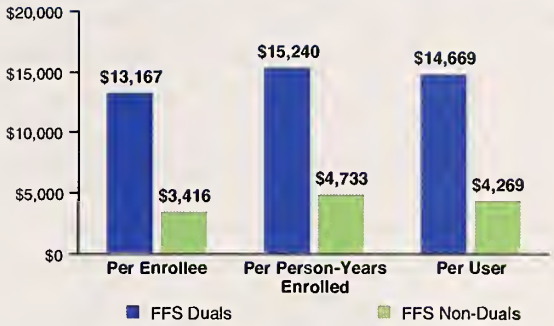
Figure 5.7
Medicaid Enrollment and Fee-for-Service (FFS) Expenditures Among Dual and Non-Dual FFS Enrollees in 2002



Source: Medicaid Analytic Extract, 2002.
FFS enrollees = full-benefit enrollees not enrolled in HMOs/HIOs in 2002.

A comparison of per-enrollee expenditures between dual and non-dual enrollees in Figure 5.8 indicates that the average cost for duals ($13,167) was more than three times higher than costs for non-duals ($3,416). This pattern is also evident when comparing average costs between duals and non-duals per person-years enrolled ($15,240 for duals compared to $4,733 for non-duals) and per user ($14,669 for duals and $4,269 for non-duals).

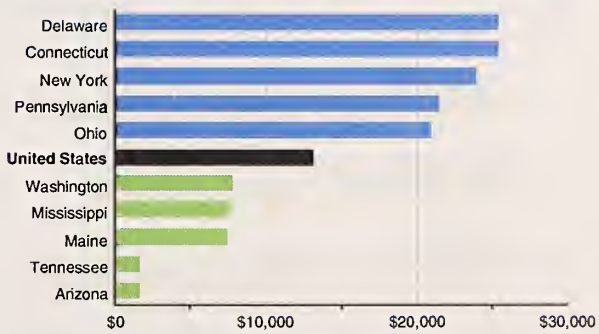
Figure 5.8
A Comparison of Medicaid Fee-for-Service (FFS) Expenditures Between FFS Duals and Non-Duals in 2002



Source: Medicaid Analytic Extract, 2002.
FFS enrollees = full-benefit enrollees not enrolled in HMOs/HIOs in 2002.

Average Medicaid expenditures per dual enrollee varied significantly across states (Figure 5.9). States with the highest average costs paid over $25,000 per dual, as observed in Delaware ($25,461) and Connecticut ($25,457). Arizona and Tennessee, two states with the highest managed care enrollment among duals, had the lowest per-enrollee FFS expenditures ($1,617 in Arizona and $1,704 in Tennessee); other low-expenditure states included Maine ($7,501), Mississippi ($7,668), and Washington ($7,741). (See Appendix Table A5.6 for details.)

Figure 5.9
Per-Enrollee Fee-for-Service (FFS) Expenditures Among FFS Duals in 2002: Top and Bottom 5 States



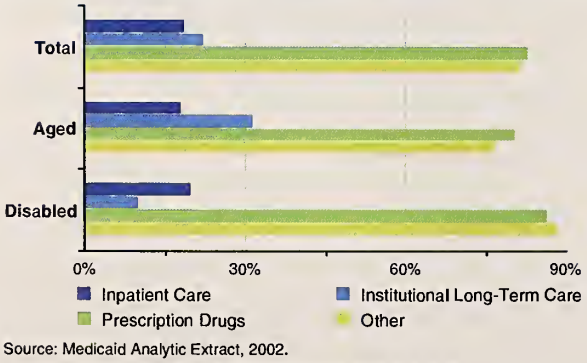
Source: Medicaid Analytic Extract, 2002.
FFS duals = full-benefit duals not enrolled in HMOs/HIOs in 2002.

Several factors may account for these differences in expenditures. High-expenditure states may have more generous benefits under Medicaid (as, for example, in Connecticut). Low-expenditure states may have less stringent enrollment criteria resulting in a higher number of less expensive enrollees (Maine and Mississippi) or have high enrollment in PHPs (Washington) whose premiums are not included among the FFS expenditures presented in Figure 5.9.

There was only a small difference in per-enrollee expenditures between FFS duals who were aged ($13,007) compared with those who were disabled ($13,566) in 2002 (Appendix Table A5.7). However, because there are more aged than disabled duals, aged duals accounted for a larger portion (56.3 percent) of all FFS dual expenditures than disabled duals (43.4 percent).

As in the overall Medicaid FFS population (see Figure 2.19), duals were more likely to have prescription drug or "other" (OT) service use than inpatient or institutional long-term care service use (Figure 5.10).[27] Because Medicare Part A covers inpatient care for duals, their Medicaid utilization and expenditures for inpatient care are low compared to utilization and costs for other services.

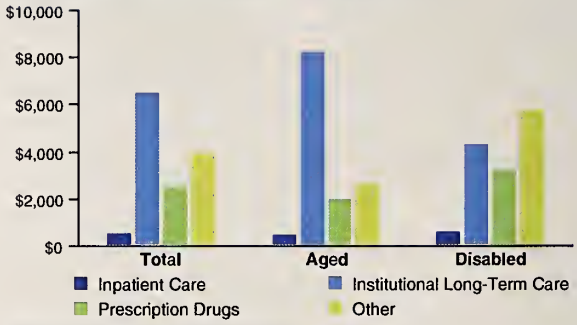
Figure 5.10
Percentage of Fee-for-Service (FFS) Duals Using Four Major Types of Service in 2002, by Basis of Eligibility



Source: Medicaid Analytic Extract, 2002.
FFS duals = full-benefit duals not enrolled in HMOs/HIOs in 2002.

Institutional long-term care was clearly the greatest expenditure among FFS dual enrollees, accounting for nearly half of their per-enrollee expenditures in 2002 (Figure 5.11). As might be expected, institutional long-term care expenditures were nearly twice as high among aged duals relative to their disabled counterparts. (See appendix tables A5.6 through A5.13 and tables A6.9 through A6.16 for state-level detail on dual service utilization and expenditures by basis of eligibility and by type of service.)

Figure 5.11
Per-Enrollee Fee-for-Service (FFS) Expenditures Among FFS Duals in 2002, by Basis of Eligibility



Source: Medicaid Analytic Extract, 2002.
FFS duals = full-benefit duals not enrolled in HMOs/HIOs in 2002.

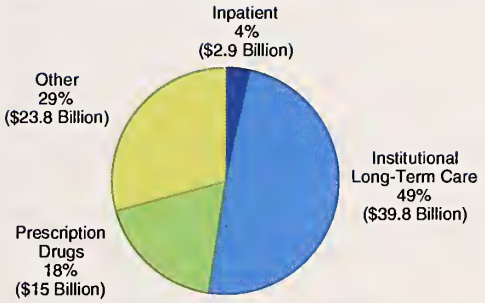
The highest expenditures for disabled duals were for OT services. The services that accounted for the highest percentage of OT expenditures among all duals included residential care, personal care services, and adult day care (see Chapter 6). Higher per-enrollee expenditures may reflect greater use of community-based long-term care services by duals who are disabled. This suggests that the difference in overall long-term care costs—including institutional and community based services–between aged and disabled duals may not be as substantial as the difference between their institutional long-term care

[27] Other services include community long-term care services; physician and other ambulatory services; and lab, X-ray, supplies, and other wraparound services. See Chapter 6 for details.

costs alone. Further examination of the differential patterns of service use by aged and disabled duals is possible with MAX data and is discussed in more depth in Chapter 6 (see also appendix tables A6.9 through A6.16).

Prescription drugs accounted for less than a fifth of FFS expenditures among FFS dual enrollees, but summed to over 15 billion dollars in 2002 (Figure 5.12). As described earlier in this chapter, coverage of prescription drugs for duals transferred from Medicaid to Medicare as of January 1, 2006. The 15 billion dollars spent on prescription drugs for these duals thus represent the expenditures that will largely be covered by Medicare for this subgroup in future years.[28] The MAX data system will allow researchers to explore patterns of Medicaid expenditures associated with this change in policy as duals enroll in Medicare Part D.

Figure 5.12
Medicaid Fee-For-Service (FFS) Expenditures Among FFS Duals in 2002, by Type of Service



Total Expenditures = $81.6 Billion

Source: Medicaid Analytic Extract, 2002.
FFS duals = full-benefit duals not enrolled in HMOs/HIOs in 2002.

[28] While coverage of prescription drugs for duals will shift from Medicaid to Medicare, state Medicaid programs will finance a significant share of this expense by paying Medicare through a "clawback" provision. Also, state Medicaid programs will continue to provide duals coverage for prescription drugs that are not coverable by Medicare plans as long as the drugs are covered in the state for other Medicaid populations.

6. Special Topic: Utilization and Expenditures by Detailed Type of Service

States cover a range of medical services in Medicaid. As discussed in Chapter 1, these include both mandatory services that state Medicaid programs are required to cover under federal law as well as optional services that vary significantly across states. Detailed analysis of Medicaid FFS service use and expenditures by type of service is possible using the MAX data system.[29] In this chapter, we summarize Medicaid service utilization and costs in 2002 by detailed type of service for all full-benefit FFS enrollees and for the subgroup of FFS duals.

In prior chapters, Medicaid services were categorized into inpatient care, institutional long-term care, prescription drugs, and other services generally following the four types of claim files available in MAX. These data can be used to identify services in much more detail using provider codes, service codes, and other fields available in claims records. Additionally, MAX claims contain a type-of-service (TOS) code for the 30 service categories shown in Table 6.1. Information about utilization and FFS expenditures incurred during the year for each of the 30 services is included for each enrollee in the MAX person summary file. In this chapter, we provide an overview of utilization and expenditures by these detailed type of service categories, focusing

[29] MAX contains extensive Medicaid FFS utilization and payment information and monthly premium but limited utilization information from Medicaid managed care plans. See Chapter 1 for more detail about the availability of managed care information in MAX.

Table 6.1
Type-of-Service (TOS) Codes in MAX 2002, by File Type

Type of Service	TOS Code
Inpatient (IP) File	
Inpatient hospital	01
Institutional Long-Term Care (LT) File	
Mental hospital services for the aged	02
Inpatient psychiatric facility services for individuals under age 21	04
Intermediate care facility services for the mentally retarded (ICF/MR)	05
Nursing facility services	07
Prescription Drug (RX) File	
Prescription drugs	16
Other (OT) File	
Physician services	08
Dental care	09
Other practitioner services	10
Outpatient hospital	11
Clinic	12
Home health	13
Lab and X-ray	15
Other services*	19
Sterilizations*	24
Abortions*	25
Transportation	26
Personal care services	30
Targeted case management	31
Rehabilitation	33
Physical therapy, occupational therapy, speech, or hearing services	34
Hospice benefits	35
Nurse midwife services	36
Nurse practitioner services	37
Private duty nursing	38
Religious non-medical health care institutions*	39
Durable medical equipment*	51
Residential care	52
Psychiatric services	53
Adult day care	54

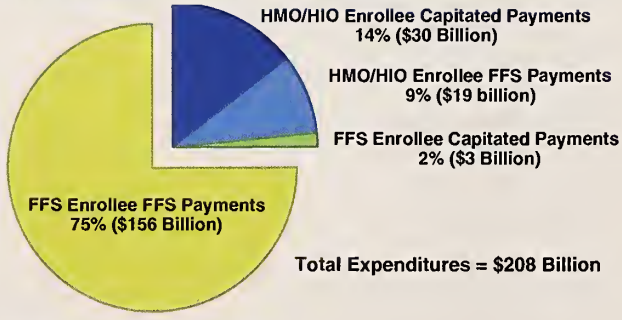
*Claims of this service type may also appear in file types other than OT.

on services grouped within the long-term care and other services categories. (Inpatient and prescription drugs form their own service categories and were presented in chapters 2 and 3.)

It is important to note that type of service information presented in this chartbook reflects full-benefit FFS enrollees and their FFS utilization only. As discussed in Chapter 2, FFS enrollees exclude two important groups: enrollees receiving only restricted Medicaid benefits in 2002 and people ever enrolled in HMOs/HIOs in 2002. FFS expenditures exclude any capitated payments for PHP and PCCM plans in which FFS enrollees may be enrolled.

Figure 6.1 shows that the expenditures presented in this chapter reflect 75 percent ($156 billion) of all expenditures among full-benefit enrollees and almost all expenditures for FFS enrollees (the $3 billion in capitation payments for PHP and PCCM enrollment among FFS enrollees is excluded).

Figure 6.1
FFS Expenditures Among FFS Enrollees as a Percentage of All Full-Benefit Enrollee Expenditures in 2002



Source: Medicaid Analytic Extract, 2002.
HMO/HIO = health maintenance organization or health insuring organization.
FFS enrollees = full-benefit enrollees not enrolled in HMOs/HIOs in 2002.

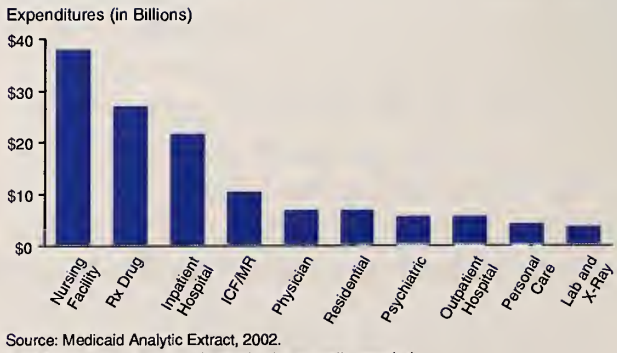
Because there is significant variation across states in managed care enrollment, the statistics presented in this chapter represent a differential share of total expenditures in each state. In appendix tables for this chapter (tables A6.1 through A6.16), we identify states in which over 50 and 75 percent of the Medicaid population is enrolled in comprehensive managed care (HMO or HIO). Please refer to Chapters 3 and 4 for additional managed care enrollment detail by type of plan by state.

Observed differences in utilization and expenditures between states may also be due to differences in the structure of states' Medicaid programs and reimbursement rates, demographic composition, enrollment in PHPs, or other utilization or cost-driving factors. Such differences must be taken into account when interpreting the national and state-level utilization and expenditure measures presented in this and other chapters of the chartbook.

Most Expensive and Most Utilized Services Among Medicaid FFS Enrollees

Nationally, FFS expenditures for FFS enrollees cost over $156 billion in 2002. The top ten most costly services (of the 30 service types) accounted for more than 80 percent of these expenditures. Nursing facility services contributed most ($37.5 billion) to this population's FFS costs in 2002, followed by prescription drugs ($26.5 billion), inpatient hospital use ($21.4 billion), and ICFs/MR ($10.1 billion) (Figure 6.2).

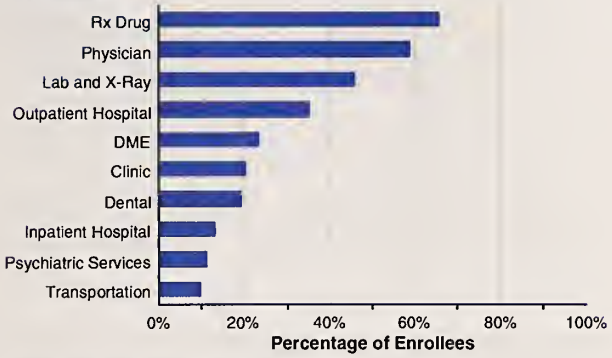
Figure 6.2
Top 10 Most Expensive Medicaid Service Types Among All Fee-for-Service Enrollees in 2002



Source: Medicaid Analytic Extract, 2002.
ICF/MR = intermediate care facility for the mentally retarded.

High cost services may reflect frequently used services, high-cost services, or both. Prescription drugs and physician services—among the five most costly services for Medicaid—were used by a majority of FFS enrollees (66.0 and 59.0 percent, respectively) (Figure 6.3). On the other hand, two other expensive services—nursing facilities and ICF/MRs—were used by only a small percentage (5.1 and 0.4 percent, respectively) of Medicaid FFS enrollees.

Figure 6.3
Top 10 Most Utilized Services by All Fee-for-Service Enrollees in 2002

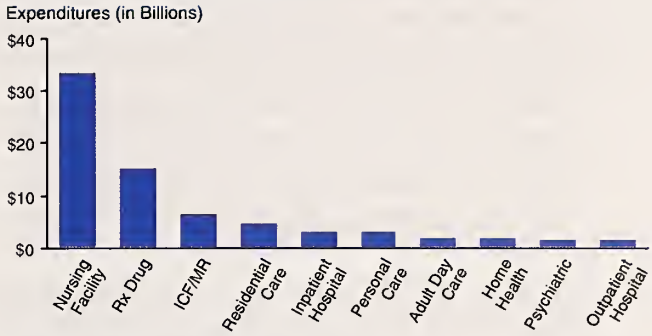


Source: Medicaid Analytic Extract, 2002.
DME = durable medical equipment.

The subset of FFS enrollees who were dually enrolled in Medicare and Medicaid incurred a total of $81.6 billion in FFS Medicaid expenditures and accounted for more than half of the FFS expenditures of all FFS enrollees. Over $33 billion was spent on nursing facility services for duals (Figure 6.4), accounting for 89 percent of all FFS nursing home expenditures in 2002. Other high cost services for duals included prescription drugs ($15.0 billion) and ICFs/MR ($6.2 billion).

Because duals are comprised of aged and disabled enrollees, they were more likely than other enrollees to use most Medicaid services. Twenty-one percent of FFS duals used nursing facility services in 2002 (Figure 6.5), compared with only 5.1 percent among all FFS enrollees. Only a handful of services—

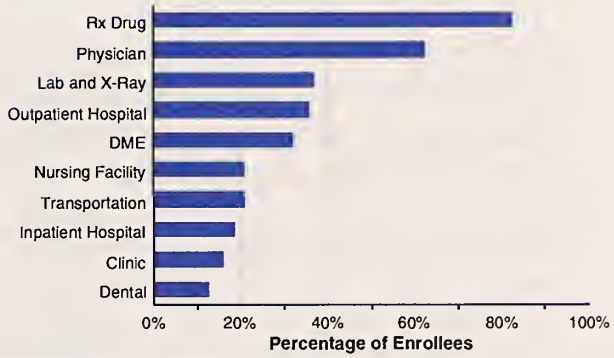
Figure 6.4
Top 10 Most Expensive Medicaid Service Types Among Fee-for-Service Duals in 2002



Source: Medicaid Analytic Extract, 2002.
ICF/MR = intermediate care facility for the mentally retarded.

typically those covered by Medicare for duals, such as inpatient and outpatient psychiatric, clinic, dental, and lab and X-ray—were used more often by non-duals than duals in 2002 (see appendix tables A6.1 through A6.16).

Figure 6.5
Top 10 Most Utilized Services by Fee-for-Service Duals in 2002



Source: Medicaid Analytic Extract, 2002.
DME = durable medical equipment.

Composition of FFS Expenditures

To examine the composition of FFS expenditures, we aggregate the 30 service types into six larger classes. Three of the classes generally correspond to three types of claims files:

- *Institutional long-term care (ILTC)*: all long-term care services in the LT claims files, including psychiatric services for individuals under age 21 and services provided in nursing facilities, intermediate care facilities for the mentally retarded, and mental hospitals for the aged. Institutional long-term care may include an array of bundled services such as physical therapy and oxygen.

- *Inpatient hospital*: inpatient hospital services; may include some bundled services such as lab tests or prescription drugs filled during a stay.

- *Prescription drugs*: all Medicaid prescriptions filled, except those bundled with inpatient, nursing home, or other services.

We classify all other services into three classes:

- *Community long-term care*: residential care, home health, personal care services, adult day care, and hospice care.[30]

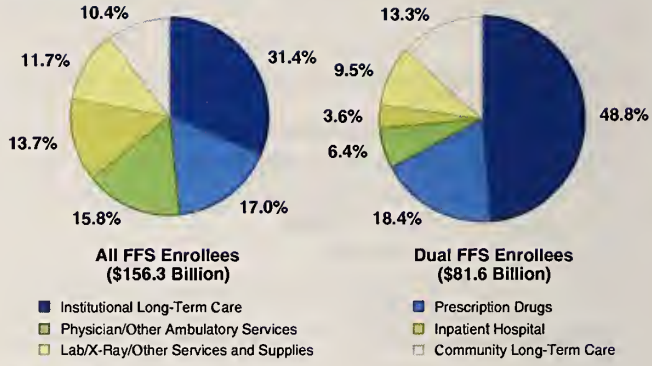
- *Physician and other ambulatory services*: physician, outpatient hospital, clinic, dental, other practitioners, physical therapy or occupational therapy (PT/OT), rehabilitation, and psychiatric services.

- *Lab, X-ray, supplies, and other wraparound services*: lab and X-ray, durable medical equipment (DME), transportation, targeted case management, and other services.

[30] Some community long-term care services may be not be included in the community long-term care service class: psychiatric residential care may be classified with psychiatric services under physician and other professional services; community long-term care provided under 1915(c) or 1915(d) waivers may be unclassified and grouped with "other services"; and transportation, targeted case management, and durable medical equipment—sometimes used for long-term care—are not included.

Of these six service classes, institutional long-term care contributed the most to FFS Medicaid expenditures among all FFS enrollees (31.4 percent) and among FFS enrollees who were dually enrolled in both Medicare and Medicaid at some point during 2002 (48.8 percent) (Figure 6.6).

Figure 6.6
Composition of Fee-for-Service (FFS) Expenditures Among FFS Enrollees in 2002



Source: Medicaid Analytic Extract, 2002.

Institutional long-term care expenditures were substantially greater than community-based long-term care expenditures. Among all FFS enrollees, community long-term care services accounted for 10.4 percent ($16.3 billion) of FFS costs, compared with 31.4 percent ($49.1 billion) for institutional long-term care. However, unlike nursing facility services, most community long-term care services are covered at state option.[31]

Among the subgroup of FFS duals, almost 49 percent of FFS expenditures ($39.8 billion) were for institutional long-term care, compared with 13.3 percent ($10.9 billion) for community-based services. Because Medicare covers many acute care

[31] Because some community long-term care services are excluded from the community long-term care class, estimated expenditure measures may significantly understate total Medicaid community long-term care costs.

services for duals, it is expected that long-term care and other non-acute care costs would account for a larger portion of expenditures than inpatient care among FFS duals.

Of importance, long-term care service costs for duals were large in both percentage and absolute value. FFS duals' use of institutional and community long-term care accounted for more than 77.6 percent of all FFS long-term care costs incurred by Medicaid FFS enrollees.

The combined totals for institutional and community-based long-term care services accounted for 41.8 percent of all FFS enrollee costs and 62.2 percent of such costs among the subgroup of duals. Because the combined long-term care services represented a substantial portion of Medicaid FFS expenditures for this population, they are explored in more detail below.

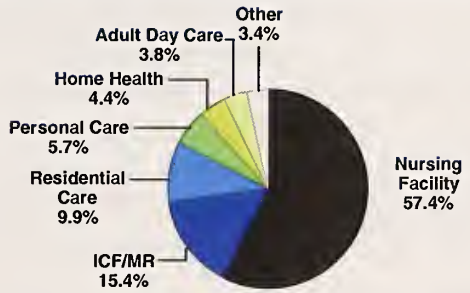
Prescription drugs, inpatient hospital, and outpatient services were also large cost drivers among Medicaid FFS enrollees in 2002. Because Medicare is first payer for outpatient and inpatient hospital services, these services made up a smaller percentage of overall expenditure among dual FFS enrollees.

Below, we present long-term care utilization and expenditure information by type of service for all FFS enrollees and only supplementary information for FFS duals. See Chapter 5 and appendix tables A6.9 through A6.12 for more detail about FFS long-term care utilization and costs among FFS duals.

Institutional and Community Long-Term Care Services by Type of Service

Nursing facilities were the biggest driver of long-term care costs and accounted for 57.4 percent ($37.5 of $65.4 billion dollars) of all FFS long-term care expenditures for FFS enrollees in 2002 (Figure 6.7). Among duals, nursing facility services accounted for 65.7 percent ($33.3 of $50.7 billion dollars) of FFS long-term care expenditures (data not shown). Other services that represented a high percentage of long-term care costs for all FFS enrollees were ICFs/MR (15.4 percent), residential care (9.9 percent), and personal care services (5.7 percent).

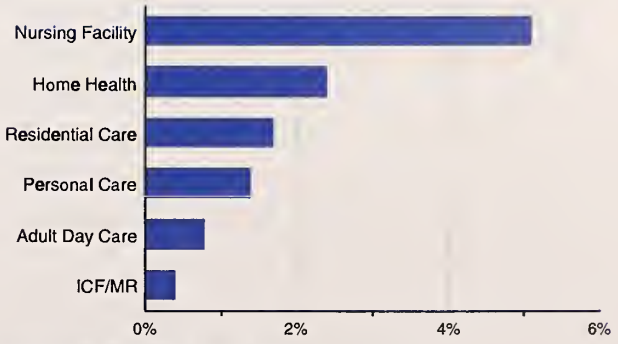
Figure 6.7
Composition of Institutional and Community-Based FFS Long-Term Care Expenditures Among FFS Enrollees in 2002



Source: Medicaid Analytic Extract, 2002.
ICF/MR = intermediate care facility for the mentally retarded.

Long-term care services were used by only a small percentage of Medicaid FFS enrollees. Nursing facility services were the most utilized long-term care service (5.1 percent), followed by home health (2.4 percent), residential care (1.7 percent), and personal care (1.4 percent) (Figure 6.8). Among FFS duals,

Figure 6.8
Percentage of Fee-for-Service Enrollees Who Used Select Long-Term Care Services in 2002

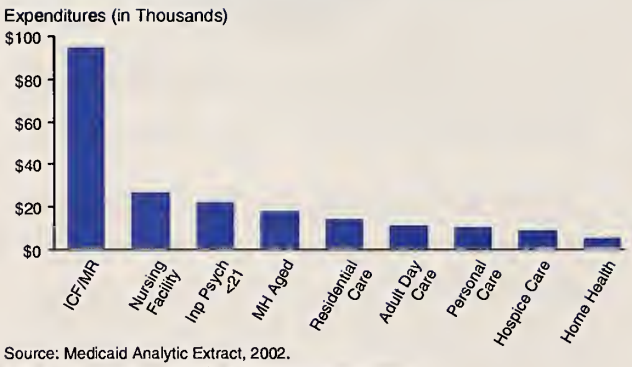


Source: Medicaid Analytic Extract, 2002.
ICF/MR = intermediate care facilty for the mentally retarded.

utilization of long-term care services was more common: 21.0 percent used nursing facilities; the percentages using personal care, residential care, and home health were 4.8, 4.7 and 4.7, respectively (data not shown).

ICF/MR was by far the highest cost service per user; average Medicaid expenditures were $93,967 per enrollee who received services in an ICF/MR in 2002 (Figure 6.9). Other services with high annual per-user costs included nursing facility services ($26,002), inpatient psychiatric care for those under age 21 ($21,518), and mental hospitals for the aged ($17,086).

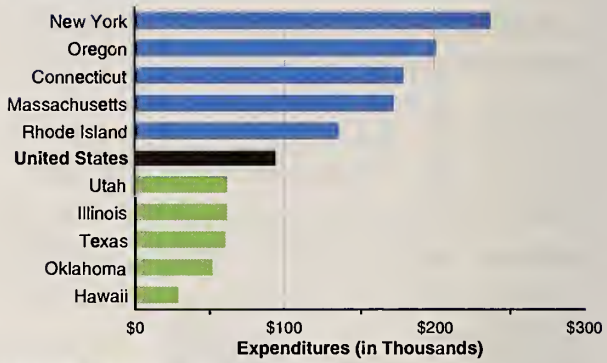
Figure 6.9
Per-User Expenditures for Long-Term Care Services Among Fee-for-Service Enrollees in 2002



Source: Medicaid Analytic Extract, 2002.
ICF/MR = intermediate care facility for the mentally retarded.

Among states with any ICF/MR utilization, average expenditures per user varied greatly, ranging from $29,537 in Hawaii to $238,553 in New York (Figure 6.10). States with higher expenditures for ICFs/MR tended to have less frequent use of the service among enrollees. Four of the top five states in per-user ICF/MR costs had a lower than average percent of enrollees using ICFs/MR, whereas all of the bottom five states had above-average utilization of this service.

Figure 6.10
Per-User ICF/MR Expenditures in 2002: Top and Bottom 5 States



Source: Medicaid Analytic Extract, 2002.
ICF/MR = intermediate care facility for the mentally retarded.

Because FFS duals make up a majority of long-term care users, the composition of their long-term care costs and per-user expenditures was similar to those of all FFS enrollees.

Physician and Other Ambulatory Services

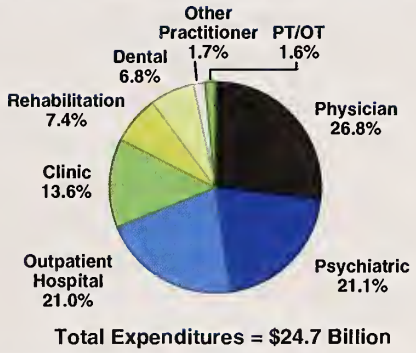
Physician and other ambulatory services accounted for 15.8 percent of FFS expenditures among FFS enrollees and were the third most costly category of service after long-term care and prescription drugs.[32]

Physician services were both the largest contributor to physician and other ambulatory service expenditures ($6.6 billion) and the most utilized such service by Medicaid FFS enrollees (59 percent) (figures 6.11 and 6.12). Other key cost drivers were psychiatric services ($5.2 billion), outpatient hospital services ($5.2 billion), clinic services ($3.3 billion), and rehabilitation services ($1.8 billion).

In comparison to other ambulatory services, costs per user were highest for rehabilitation services. Rehabilitation services were used by only 2.1 percent of Medicaid FFS enrollees but represented

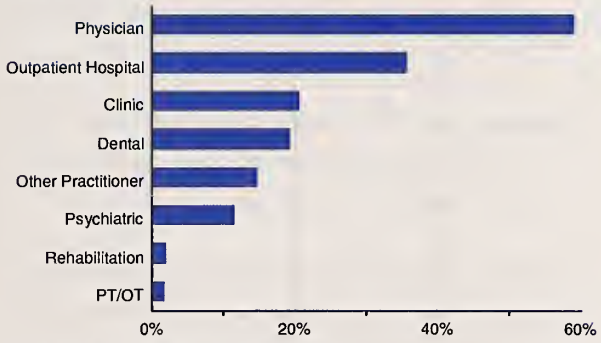
[32] Claims for physician services include separately billed physician services provided in inpatient settings.

Figure 6.11
Composition of Physician and Other Ambulatory Service Expenditures Among Fee-for-Service Enrollees in 2002



Source: Medicaid Analytic Extract, 2002.
PT = physical therapy; OT = occupational therapy.

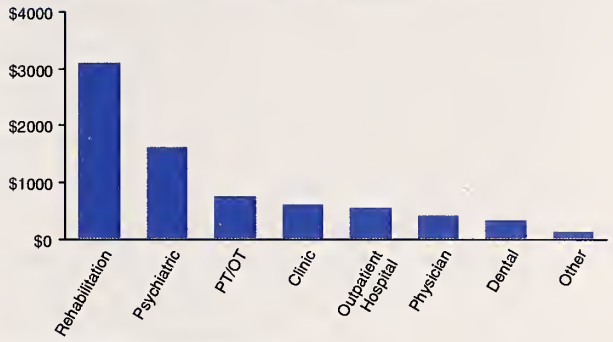
Figure 6.12
Percentage of Fee-for-Service Enrollees Who Used Physician or Other Ambulatory Services in 2002



Source: Medicaid Analytic Extract, 2002.
PT = physical therapy; OT = occupational therapy.

7.4 percent of their physician and other ambulatory service expenditures. Figure 6.13 shows that expenditures for rehabilitation services were $3,089 per user in 2002, compared to $1,594 and $725 for psychiatric and PT/OT services, respectively.

Figure 6.13
Per-User Expenditures for Physician and Other Ambulatory Services Among Fee-for-Service Enrollees in 2002



Source: Medicaid Analytic Extract, 2002.
PT = physical therapy; OT = occupational therapy.

Additional summary information about FFS ambulatory and professional service use and expenditures in 2002 can be found in appendix tables A6.5 and A6.6 for all FFS enrollees and in tables A6.13 and A6.14 for FFS duals.

The results presented in this chapter and associated appendix tables represent only a small sample of the types of possible analyses that could be conducted with the MAX type-of-service data. MAX data can be used to investigate program cost-drivers in greater depth. They can also be used to examine how changing patterns of utilization and expenditures are influenced by changing population demographics, state policies, and/or Medicaid coverage rules.

Glossary of Terms

1115 Waiver (MAS Group) = a maintenance assistance status (MAS) group that consists of people eligible for Medicaid via a state 1115 waiver program that extends benefits to certain otherwise ineligible persons.[33] Some states provide only limited family planning benefits or other limited services to 1115 adults, although a few states provide full Medicaid benefits to persons qualifying through 1115 provisions.

Adults = a basis of eligibility (BOE) group that includes pregnant women and caretaker relatives in families with dependent (minor) children; most caretaker relatives of dependent children are parents, but this group can also include other family members serving as caretakers such as aunts or grandparents. In a few states with waivers, the adult BOE group includes childless adults.

Aged = a basis of eligibility (BOE) group that includes people age 65 or older.

Alien = a person who is not a permanent resident or citizen of the United States. In Medicaid, "unqualified" aliens include illegal immigrants and immigrants entering the U.S. legally after 1996 for 5 years from their date of entry; unqualified aliens are eligible only for emergency hospital services.

Basis of Eligibility (BOE) = eligibility grouping that traditionally has been used by CMS to classify enrollees; BOE categories include children, adults, aged, and disabled (see other entries for descriptions of these categories).

Capitation or Capitated Payment = a method of payment for health services in which a health plan, practitioner, or hospital is paid in advance a fixed amount to cover specified health services for an individual for a specific period of time, regardless of the amount or type of services provided. In contrast with fee-for-service (see entry below), capitation shifts the financial risk of caring for patients from the payer to the provider.

Cash Assistance-Related = a maintenance assistance status (MAS) group that consists of persons receiving SSI benefits and those who would have qualified under the pre-welfare reform Aid to Families with Dependent Children (AFDC) rules.

Children = a basis of eligibility (BOE) group that includes persons under age 18 or up to 21 in states electing to cover older children.

Community-Based Long-Term Care = long-term support services for people who are not institutionalized but who do require nursing or other support services typically provided in nursing homes or other institutions. In this chartbook, we include five MAX service types in community-based long-term care: adult day care, home health, hospice care, personal care services, and residential care.

Disabled = a basis of eligibility (BOE) group that includes persons of any age (including children) who are unable to engage in substantial gainful activity by reason of any medically determinable physical or mental impairment that can be expected to result in death or that has lasted or can be expected to last for a continuous period of not less than 12 months.

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[33] Many 1115 waivers also have other provisions such as mandatory managed care coverage. However, the MAS 1115 waiver group only relates to the 1115 eligibility extensions.

Disproportionate Share Hospital (DSH) = a hospital that serves a disproportionate share of low-income patients. DSH facilities receive supplemental Medicaid payments in addition to reimbursements for the Medicaid enrollees they serve.

Duals = persons dually enrolled in Medicare and Medicaid (sometimes referred to as dual eligibles). In this chartbook, duals are defined as people in the Medicaid data files with matching records in the EDB indicating enrollment in both Medicare and Medicaid in at least one month in 2002.

Durable Medical Equipment (DME) = medical equipment (wheelchairs, beds); supplies (adult diapers, dialysis equipment); home improvements (ramps); emergency response systems; and repairs, replacements, or renting of these items.

Encounter Claims = claims for services utilized under managed care. Encounter claims do not include payment information for services used; MAX encounter claims are believed to be incomplete.

Enrollee = for the purposes of this chartbook, people enrolled in Medicaid for at least one day in 2002 (sometimes referred to as beneficiaries or eligibles).

(Medicare) Enrollee Database (EDB) = the authoritative data source for all Medicare entitlement information; contains information on all Medicare beneficiaries, including demographic information, enrollment dates, and Medicare managed care enrollment.

Family Planning = services and supplies that enable individuals and couples to anticipate and have the desired number of children and to space and time their births. There is no regulatory definition for the services and supplies covered by Medicaid, but CMS has provided guidance that states may cover counseling services, examination and treatment by medical professionals, pharmaceutical devices to prevent conception, and infertility services.

Federal Fiscal Year (FFY) = the federal fiscal year begins on October 1 and ends on September 30 of the following year; FY 2002 runs from October 1, 2001, through September 30, 2002.

Federal Medical Assistance Percentage (FMAP) = the federal matching rate for states for service costs incurred by the Medicaid program. The FMAP is calculated by taking into account the average per capita income in a given state in relation to the national average; the FMAP ranged from 50 to 76 percent in 2002, with higher matching allocated to states with lower per capita income.

Fee-for-Service (FFS) = a payment mechanism in which payment is made for each service used.

Health Maintenance Organization/Health Insuring Organization (HMO/HIO) = health care plans that provide comprehensive medical services to people in return for a prepaid fee.

Inpatient Care = health care received when an individual is admitted to a hospital.

Institutional Long-Term Care (ILTC) = Medicaid covered institutional or inpatient long-term care services. ILTC includes the following four service types: nursing facility services, intermediate

care facility services for the mentally retarded (ICF/MR), mental hospital services for the aged, and inpatient psychiatric facility services for those under age 21.

Institutional Long-Term Care File (LT) = MAX institutional long-term care claims file (community long-term care services are categorized as "other" and can be found in the MAX OT file).

Maintenance Assistance Status (MAS) = eligibility grouping traditionally used by CMS to classify enrollees by the financial-related criteria by which they are eligible for Medicaid. MAS groups include cash assistance-related, medically needy, poverty-related, 1115 waiver, and other (see other entries for descriptions of these categories).

Managed Care (MC) = systems and payment mechanisms used to manage or control the use of health care services, which may include incentives to use certain providers and case management. A managed care plan usually involves a system of providers with a contractual arrangement with the plan; health maintenance organizations (HMOs), primary care case management (PCCM) plans, and prepaid health plans (PHPs) are examples of managed care plans.

Medicaid Statistical Information System (MSIS) = the CMS data system containing complete eligibility and claims data from each state Medicaid program. Electronic submission of data by states to MSIS became mandatory in 1999, in accordance with the Balanced Budget Act of 1997.

Medically Needy (MN) = a maintenance assistance status (MAS) group that includes persons qualifying for Medicaid through the medically needy provision (a state option) that allows for a higher income threshold than required by the AFDC cash assistance level. Persons with income above the medically needy threshold can deduct incurred medical expenses from their income and/or assets—or "spend down" their income/assets—to determine financial eligibility.

Medicare Prescription Drug, Improvement, and Modernization Act (MMA) of 2003 = amendment to Title XVIII of the Social Security Act that added Part D—the Medicare prescription drug benefit—to cover the costs of outpatient prescription drugs through prescription drug plans beginning in 2006.

Other = a maintenance assistance status (MAS) group that consists of a mixture of mandatory and optional coverage groups not reported under the other MAS categories, including many institutionalized aged and disabled, those qualifying through hospice and home- and community-based care waivers, and immigrants who qualify for emergency Medicaid benefits only.

Person-Years Enrollment (PYE) = a measure of the actual amount of time that Medicaid enrollees were enrolled in Medicaid. In contrast with the number of enrollees, this assigns a lower count for those enrollees who are not enrolled for a full year (for example, a person who is enrolled in Medicaid for six months of the year will contribute 0.5 person-years enrollment).

Poverty-Related = a maintenance assistance status (MAS) group that consists of persons qualifying through any poverty-related Medicaid expansions enacted from 1988 on; in addition, this group includes QMB, SLMB, and QI dual groups.

Prepaid Health Plan (PHP) = a type of managed care plan that provides less than comprehensive services on an at-risk basis; these may include dental care, behavioral health services, long-term care, or other service types.

Primary Care Case Management (PCCM) = a type of managed care plan that involves the payment of a small premium (often three dollars per person per month) for case management services only; in some states, PCCM premiums are not paid unless case management services are delivered.

Program of All-Inclusive Care for the Elderly (PACE) = a program that states may offer to older Medicaid enrollees (55 or older) who are in need of nursing facility care. PACE providers are paid on a capitated basis and enrollees receive all the services covered by Medicare and Medicaid through their PACE provider.

Qualified Disabled and Working Individuals (QDWIs) = disabled and working Medicare beneficiaries with income between 175 and 200 percent of the federal poverty level (FPL) and eligible for Medicare Part A. States have the option to cover Medicare Part A premiums for QDWIs.

Qualified Individuals 1 (QI1s) = Medicare beneficiaries with income between 120 percent and 135 percent of the FPL; Medicaid pays all or some of Medicare Part B premiums for QI1s.

Qualified Individuals 2 (QI2s) = Medicare beneficiaries with income between 135 and 175 percent of the FPL. States have the option to cover a portion of Medicare Part B premiums for QI2s.

Qualified Medicare Beneficiary (QMB) = a Medicare beneficiary with income below 100 percent of FPL and assets under 200 percent of SSI asset limit. QMBs receive Medicare premiums and cost-sharing payments, and a vast majority of QMBs qualify for full Medicaid benefits.

Recipient = Medicaid enrollees with any service use are called Medicaid recipients, sometimes referred to as "persons served." Medicaid recipients sometimes include people enrolled in comprehensive managed care.

Restricted-Benefit Enrollees = Medicaid enrollees who receive only limited health coverage. In this chartbook, restricted-benefit enrollees include "unqualified" aliens eligible for only emergency hospital services, duals receiving only coverage for Medicare premiums and cost-sharing, and people receiving only family planning services.

Section 209(b) States = states that have elected to use more restrictive eligibility requirements than those of the Supplemental Security Income (SSI) program. These requirements cannot be more restrictive than those in place in the state's Medicaid plan as of January 1, 1972. Section 209(b) states include Connecticut, Illinois, Minnesota, New Hampshire, Ohio, Virginia, Hawaii, Indiana, Missouri, North Dakota, and Oklahoma.

Specified Low-Income Medicare Beneficiary (SLMB) = a Medicare beneficiary with income between 100 percent and 120 percent of the FPL who is eligible for Medicaid payment of Part B Medicare premiums; some SLMBs also qualify for full Medicaid benefits.

State Children's Health Insurance Program (SCHIP) = authorized in 1997, this program provides enhanced federal matching funds to help states expand health care coverage to the nation's uninsured children. SCHIP is jointly financed by federal and state governments and adminis-

tered by states. States may administer SCHIP through their Medicaid program (referred to as M-SCHIP) or as a separate program (referred to as S-SCHIP); M-SCHIP children are included in the MAX data and reported under the poverty-related maintenance assistance status (MAS).

Supplemental Security Income (SSI) = a federal entitlement program providing cash assistance to low-income aged, blind, and disabled individuals; people receiving SSI are eligible for Medicaid in all but Section 209(b) states, where more restrictive criteria may be used to determine Medicaid eligibility.

Temporary Assistance for Needy Families (TANF) = a block grant program that provides states with federal matching funds for cash and other assistance to low-income families with children. Established through the 1996 welfare law that repealed the Aid to Families with Dependent Children (AFDC) program, TANF eligibility has no direct bearing on Medicaid eligibility (as was the case with AFDC); however, 1996 AFDC rules are still used to determine eligibility for Medicaid. AFDC groups are commonly referred to as the Section 1931 groups (after the section of the Social Security Act that specifies AFDC-related eligibility after welfare reform).

Upper Payment Limit (UPL) = limit on payments made by states to facilities and providers for which the federal government will provide matching funds. UPL programs are funding mechanisms in which states supplement reimbursable service costs at specific facilities; payments may exceed the costs of services provided to Medicare beneficiaries in those facilities as long as they are not higher than the aggregate UPL for that class of facilities.

User = enrollees with a claim for a specific service are called "users" of that service; enrollees typically use multiple services.

Waivers = statutory authorities that allow states to receive federal matching funds for Medicaid expenditures even if the state is not in compliance with requirements of the federal Medicaid statute; for example, 1115 waivers allow states to cover categories of people that are not generally covered under Medicaid.

Acronyms and Abbreviations

AFDC = Aid to Families with Dependent Children

BHO = behavioral health organization

BOE = basis of eligibility

DME = durable medical equipment

DSH = disproportionate share hospital

EDB = (Medicare) Enrollee DataBase

ESRD = end-stage renal disease

FFS = fee-for-service

FFY = federal fiscal year

FMAP = federal medical assistance percentage

FPL = federal poverty level

HH = home health

HMO/HIO = health maintenance organization/health insuring organization

ICF/MR = intermediate care facility for the mentally retarded

ILTC = institutional long-term care

IP = inpatient; MAX inpatient claims file

LT = MAX long-term care claims file

MAS = maintenance assistance status

MAX = Medicaid Analytic Extract

MC = managed care

MMA = Medicare Prescription Drug, Improvement, and Modernization Act (MMA) of 2003

MN = medically needy

MSIS = Medicaid Statistical Information System

NF = nursing facility

OT = occupational therapy in the context of specific services; "other" services in the context of summary type of service; MAX other types of claims file

PACE = Program of All-Inclusive Care for the Elderly

PCCM = primary care case management

PHP = prepaid health plan

PS = MAX person summary file

PT = physical therapy

PYE = person-years enrollment

QDWI = Qualified Disabled and Working Individual

QI = Qualified Individual

QMB = Qualified Medicare Beneficiary

RX = prescription drugs; MAX prescription drug claims file

SCHIP = State Children's Health Insurance Program

SLMB = Specified Low-Income Medicare Beneficiary

SSI = Supplemental Security Income

TANF = Temporary Assistance for Needy Families

UPL = upper payment limit

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See also tables A4.I-A4.3, A5.I-A5.13, and A6.1-A6.I6.

TABLE A3.1

MEDICAID ENROLLMENT IN 2002

	Number of Enrollees	Percentage of Population	Percentage Enrolled All Year	Total Person-Years of Enrollment	Number of Enrollees in June 2002
United States	**53,249,159**	**18.5**	**55.3**	**41,437,049**	**41,118,773**
Alabama	859,136	19.2	61.6	707,655	703,583
Alaska	124,466	19.4	35.1	89,116	92,345
Arizona	1,139,436	21.0	42.7	816,656	804,129
Arkansas	644,566	23.8	59.7	510,137	492,147
California	9,539,318	27.3	54.5	7,495,989	7,474,761
Colorado	447,329	9.9	48.9	333,131	329,883
Connecticut	497,007	14.4	63.5	409,689	407,996
Delaware	150,189	18.6	53.4	116,657	115,312
District of Columbia	152,568	27.0	68.8	130,079	129,808
Florida	2,745,729	16.5	51.1	2,072,435	2,070,913
Georgia	1,583,105	18.4	45.0	1,132,073	1,090,633
Hawaii	206,604	16.7	58.3	163,175	158,636
Idaho	199,674	14.9	54.2	153,537	152,411
Illinois	2,104,850	16.7	55.5	1,628,175	1,646,486
Indiana	918,661	14.9	54.7	715,617	723,175
Iowa	363,218	12.4	51.9	274,263	271,034
Kansas	311,084	11.5	46.1	228,282	215,195
Kentucky	788,947	19.3	57.9	628,101	620,695
Louisiana	1,046,074	23.4	61.9	838,929	827,767
Maine	359,485	27.7	73.5	311,945	307,581
Maryland	789,260	14.5	61.9	636,641	625,666
Massachusetts	1,210,399	18.9	64.5	1,006,099	1,002,798
Michigan	1,548,615	15.4	58.2	1,230,909	1,226,868
Minnesota	694,738	13.8	54.0	526,305	520,288
Mississippi	716,727	25.0	62.1	589,863	582,224
Missouri	1,128,690	19.9	66.9	942,746	942,465
Montana	108,720	11.9	46.5	78,664	79,066
Nebraska	268,306	15.5	57.7	214,886	215,609
Nevada	219,336	10.1	38.8	148,157	144,286
New Hampshire	122,576	9.6	50.2	90,816	87,808
New Jersey	1,019,452	11.9	61.4	824,777	831,336
New Mexico	465,415	25.1	61.3	382,124	380,722
New York	4,527,583	23.6	53.9	3,423,283	3,364,341
North Carolina	1,425,322	17.1	56.4	1,114,667	1,107,957
North Dakota	73,623	11.6	50.2	54,645	54,149
Ohio	1,835,819	16.1	57.4	1,447,435	1,410,735
Oklahoma	718,198	20.6	40.7	494,117	495,688
Oregon	648,195	18.4	38.9	450,664	453,245
Pennsylvania	1,732,000	14.1	64.8	1,429,011	1,420,974
Rhode Island	206,557	19.3	67.2	173,598	172,422
South Carolina	932,954	22.7	72.3	805,881	798,351
South Dakota	117,356	15.4	54.2	90,923	90,428
Tennessee	1,660,072	28.7	68.0	1,435,695	1,447,879
Texas	3,358,234	15.5	44.6	2,403,352	2,383,807
Utah	250,703	10.7	33.7	157,655	153,529
Vermont	158,434	25.7	57.4	126,728	128,067
Virginia	739,755	10.2	51.9	554,260	546,327
Washington	1,130,908	18.6	55.4	896,710	887,809
West Virginia	377,326	20.9	49.5	280,689	277,117
Wisconsin	812,511	14.9	54.8	618,992	601,784
Wyoming	69,929	14.0	45.9	51,118	50,538

SOURCE: Medicaid Analytic Extract 2002; U.S. Census Bureau.

TABLE A3.2
MEDICAID ENROLLMENT TRENDS, 1999-2002

	Number of Enrollees				Percentage of Population				% Change
	1999	2000	2001	2002	1999	2000	2001	2002	1999-2002
United States	42,551,405	45,036,700	48,490,484	53,249,159	15.2	16.0	17.0	18.5	21.3
Alabama	657,495	735,226	788,403	859,136	14.8	16.5	17.6	19.2	29.2
Alaska	103,789	113,081	118,713	124,466	16.6	18.0	18.8	19.4	16.9
Arizona	648,016	696,768	893,295	1,139,436	12.9	13.5	16.9	21.0	62.4
Arkansas	491,245	515,600	568,602	644,566	18.5	19.2	21.1	23.8	28.6
California	7,288,627	8,265,680	8,672,422	9,539,318	21.8	24.3	25.1	27.3	25.3
Colorado	357,814	383,614	418,863	447,329	8.5	8.9	9.5	9.9	17.4
Connecticut	417,767	424,254	461,904	497,007	12.3	12.4	13.5	14.4	16.5
Delaware	116,454	126,327	136,542	150,189	15.0	16.1	17.2	18.6	24.0
District of Columbia	146,668	150,931	152,471	152,568	25.7	26.4	26.8	27.0	5.1
Florida	2,104,306	2,290,964	2,528,447	2,745,729	13.4	14.3	15.5	16.5	23.3
Georgia	1,249,063	1,246,523	1,424,809	1,583,105	15.5	15.1	16.9	18.4	18.8
Hawaii	199,173	189,159	192,629	206,604	16.5	15.6	15.8	16.7	1.7
Idaho	134,065	157,816	184,233	199,674	10.5	12.1	13.9	14.9	41.4
Illinois	1,712,826	1,758,424	1,849,417	2,104,850	13.9	14.1	14.8	16.7	20.7
Indiana	694,508	769,556	845,224	918,661	11.5	12.6	13.8	14.9	29.9
Iowa	313,720	319,664	336,155	363,218	10.8	10.9	11.5	12.4	15.1
Kansas	256,690	269,952	293,498	311,084	9.6	10.0	10.9	11.5	19.7
Kentucky	687,437	732,387	763,686	788,947	17.1	18.1	18.8	19.3	12.8
Louisiana	786,601	831,107	904,761	1,046,074	17.6	18.6	20.3	23.4	32.6
Maine	204,329	213,514	326,461	359,485	16.1	16.7	25.4	27.7	71.8
Maryland	686,834	680,710	718,078	789,260	13.1	12.8	13.3	14.5	10.9
Massachusetts	1,060,289	1,112,044	1,139,664	1,210,399	16.8	17.5	17.8	18.9	12.5
Michigan	1,339,452	1,371,840	1,448,164	1,548,615	13.5	13.8	14.5	15.4	14.0
Minnesota	591,427	620,132	665,093	694,738	12.1	12.6	13.3	13.8	14.0
Mississippi	552,951	609,441	695,061	716,727	19.5	21.4	24.3	25.0	27.9
Missouri	898,028	1,005,428	1,083,980	1,128,690	16.1	17.9	19.2	19.9	23.1
Montana	96,453	98,761	103,574	108,720	10.7	10.9	11.4	11.9	11.1
Nebraska	227,395	239,078	253,963	268,306	13.3	14.0	14.8	15.5	16.5
Nevada	139,700	155,526	164,336	219,336	7.2	7.7	7.8	10.1	40.1
New Hampshire	106,887	109,323	112,014	122,576	8.7	8.8	8.9	9.6	9.9
New Jersey	869,612	921,476	971,235	1,019,452	10.4	10.9	11.4	11.9	14.3
New Mexico	378,433	409,453	428,768	465,415	20.9	22.5	23.4	25.1	19.8
New York	3,403,171	3,421,325	3,757,642	4,527,583	18.0	18.0	19.7	23.6	31.1
North Carolina	1,209,799	1,258,959	1,404,877	1,425,322	15.2	15.6	17.1	17.1	12.7
North Dakota	61,806	62,446	66,927	73,623	9.6	9.7	10.5	11.6	21.1
Ohio	1,386,016	1,453,427	1,731,189	1,835,819	12.2	12.8	15.2	16.1	31.6
Oklahoma	533,438	590,753	631,321	718,198	15.5	17.0	17.6	20.6	32.7
Oregon	543,964	564,366	607,870	648,195	16.0	16.4	17.5	18.4	14.8
Pennsylvania	1,694,804	1,678,739	1,660,952	1,732,000	13.8	13.7	13.5	14.1	1.7
Rhode Island	169,491	185,243	196,477	206,557	16.3	17.6	18.6	19.3	18.7
South Carolina	757,964	805,296	901,979	932,954	19.1	20.0	22.2	22.7	19.2
South Dakota	95,437	102,256	110,045	117,356	12.7	13.5	14.5	15.4	21.4
Tennessee	1,541,222	1,534,357	1,628,180	1,660,072	27.3	26.9	28.3	28.7	4.9
Texas	2,710,200	2,783,521	2,935,616	3,358,234	13.2	13.3	13.8	15.5	17.3
Utah	202,235	205,778	218,689	250,703	9.2	9.2	9.6	10.7	16.9
Vermont	142,051	148,181	153,124	158,434	23.5	24.3	25.0	25.7	9.4
Virginia	696,419	701,500	700,786	739,755	9.9	9.9	9.7	10.2	2.1
Washington	899,702	981,017	1,038,000	1,130,908	15.4	16.6	17.3	18.6	21.1
West Virginia	358,317	353,052	354,040	377,326	19.8	19.5	19.7	20.9	5.7
Wisconsin	575,138	629,170	688,316	812,511	10.8	11.7	12.7	14.9	38.5
Wyoming	52,177	53,555	59,989	69,929	10.6	10.8	12.1	14.0	32.1

SOURCES: Medicaid Analytic Extract 1999-2002; U.S. Census Bureau.

TABLE A3.3

MEDICAID ENROLLMENT IN 2002, BY AGE

	Number of Enrollees				Percentage of Enrollees			
	0	1-20	21-64	65+	0	1-20	21-64	65+
United States	**2,041,261**	**28,568,473**	**16,926,512**	**5,712,913**	**3.8**	**53.7**	**31.8**	**10.7**
Alabama	32,623	460,371	241,400	124,742	3.8	53.6	28.1	14.5
Alaska	5,584	84,835	26,772	7,275	4.5	68.2	21.5	5.8
Arizona	52,896	606,949	408,180	71,411	4.6	53.3	35.8	6.3
Arkansas	24,025	386,689	168,612	65,240	3.7	60.0	26.2	10.1
California	235,315	4,308,738	4,155,778	839,487	2.5	45.2	43.6	8.8
Colorado	27,763	267,961	102,291	49,314	6.2	59.9	22.9	11.0
Connecticut	15,126	262,537	155,335	64,009	3.0	52.8	31.3	12.9
Delaware	5,429	76,232	56,852	11,676	3.6	50.8	37.9	7.8
District of Columbia	4,802	83,966	49,650	14,150	3.1	55.0	32.5	9.3
Florida	119,197	1,549,733	719,325	357,474	4.3	56.4	26.2	13.0
Georgia	94,508	996,025	330,899	161,673	6.0	62.9	20.9	10.2
Hawaii	6,623	102,199	76,146	21,636	3.2	49.5	36.9	10.5
Idaho	10,441	138,717	37,610	12,906	5.2	69.5	18.8	6.5
Illinois	88,521	1,183,658	503,055	329,616	4.2	56.2	23.9	15.7
Indiana	41,214	581,248	215,345	80,854	4.5	63.3	23.4	8.8
Iowa	15,755	204,361	101,276	41,826	4.3	56.3	27.9	11.5
Kansas	16,475	193,282	67,994	33,333	5.3	62.1	21.9	10.7
Kentucky	28,789	429,974	233,972	96,212	3.6	54.5	29.7	12.2
Louisiana	59,912	702,749	176,510	106,903	5.7	67.2	16.9	10.2
Maine	5,371	124,335	152,263	77,516	1.5	34.6	42.4	21.6
Maryland	30,870	465,786	218,501	74,103	3.9	59.0	27.7	9.4
Massachusetts	31,284	534,700	499,291	145,124	2.6	44.2	41.3	12.0
Michigan	60,609	930,996	425,076	131,934	3.9	60.1	27.4	8.5
Minnesota	26,322	374,719	201,701	91,996	3.8	53.9	29.0	13.2
Mississippi	33,279	430,996	156,192	96,260	4.6	60.1	21.8	13.4
Missouri	38,729	636,617	349,246	104,098	3.4	56.4	30.9	9.2
Montana	4,872	61,004	31,747	11,097	4.5	56.1	29.2	10.2
Nebraska	9,347	164,813	70,147	23,999	3.5	61.4	26.1	8.9
Nevada	12,498	129,603	55,956	21,279	5.7	59.1	25.5	9.7
New Hampshire	4,579	75,690	28,435	13,872	3.7	61.7	23.2	11.3
New Jersey	40,209	555,666	278,908	144,669	3.9	54.5	27.4	14.2
New Mexico	19,952	308,510	105,710	31,243	4.3	66.3	22.7	6.7
New York	120,011	1,876,504	2,025,926	505,142	2.7	41.4	44.7	11.2
North Carolina	64,921	795,040	384,497	180,864	4.6	55.8	27.0	12.7
North Dakota	2,748	37,007	23,589	10,279	3.7	50.3	32.0	14.0
Ohio	68,428	1,049,761	559,987	157,643	3.7	57.2	30.5	8.6
Oklahoma	33,718	489,384	127,627	67,469	4.7	68.1	17.8	9.4
Oregon	21,825	293,453	282,748	50,169	3.4	45.3	43.6	7.7
Pennsylvania	57,342	926,431	532,552	215,675	3.3	53.5	30.7	12.5
Rhode Island	6,237	104,676	71,376	24,268	3.0	50.7	34.6	11.7
South Carolina	34,152	545,415	265,487	87,900	3.7	58.5	28.5	9.4
South Dakota	5,362	76,358	23,185	12,451	4.6	65.1	19.8	10.6
Tennessee	41,551	760,517	693,235	164,769	2.5	45.8	41.8	9.9
Texas	234,738	2,177,242	554,481	391,773	7.0	64.8	16.5	11.7
Utah	18,830	154,190	64,168	13,515	7.5	61.5	25.6	5.4
Vermont	3,864	73,589	59,663	21,318	2.4	46.4	37.7	13.5
Virginia	34,329	438,372	165,848	101,206	4.6	59.3	22.4	13.7
Washington	36,054	691,795	322,173	80,886	3.2	61.2	28.5	7.2
West Virginia	19,377	211,129	112,606	34,214	5.1	56.0	29.8	9.1
Wisconsin	31,082	407,821	242,502	131,106	3.8	50.2	29.8	16.1
Wyoming	3,773	46,130	14,687	5,339	5.4	66.0	21.0	7.6

SOURCE: Medicaid Analytic Extract 2002.

TABLE A3.4

MEDICAID ENROLLMENT IN 2002, BY RACE AND ETHNICITY (PERCENT)

	White	Black	Hispanic or Latino	Asian	Native American/ Alaskan Native	Pacific Islander	Other
United States	**43.7**	**23.6**	**20.6**	**2.4**	**1.5**	**1.1**	**7.1**
Alabama	46.0	48.8	1.7	0.4	0.3	0.0	2.9
Alaska	42.9	5.1	3.6	4.8	36.2	2.3	5.1
Arizona	36.7	5.8	41.1	1.2	12.6	0.0	2.7
Arkansas	62.2	31.6	3.8	0.9	0.8	0.8	0.0
California	22.6	9.9	52.9	4.8	0.5	5.4	4.0
Colorado	46.3	7.2	37.2	1.0	0.7	0.1	7.6
Connecticut	46.8	22.1	28.7	2.2	0.2	0.0	0.0
Delaware	43.6	42.9	11.7	1.4	0.2	0.0	0.1
District of Columbia	1.7	87.1	7.4	0.9	0.0	0.0	2.8
Florida	37.4	29.6	20.2	0.5	0.0	0.0	12.2
Georgia	41.7	49.5	1.2	1.1	0.1	0.0	6.3
Hawaii	21.8	1.6	3.2	29.9	0.3	39.3	4.0
Idaho	85.7	0.9	10.2	0.5	2.7	0.1	0.0
Illinois	40.6	37.3	18.5	2.4	0.2	0.0	1.0
Indiana	69.1	22.3	7.1	0.4	0.1	0.0	1.1
Iowa	71.5	7.7	2.7	1.0	0.5	0.0	16.6
Kansas	65.5	16.6	2.6	1.1	1.3	0.1	12.8
Kentucky	80.8	12.5	1.7	0.3	0.0	0.0	4.7
Louisiana	35.3	57.7	0.6	0.4	0.2	0.0	5.7
Maine	96.5	1.5	0.4	0.7	0.9	0.0	0.0
Maryland	33.8	53.1	6.8	2.8	0.2	0.0	3.4
Massachusetts	50.5	10.9	15.9	3.3	0.2	0.0	19.1
Michigan	57.0	34.2	5.4	1.5	0.5	0.0	1.4
Minnesota	60.8	15.5	0.3	6.5	4.0	0.1	13.0
Mississippi	34.3	59.6	0.7	0.4	0.4	0.0	4.5
Missouri	70.1	25.4	0.0	0.7	0.3	0.0	3.4
Montana	73.4	0.7	2.7	0.4	22.7	0.0	0.0
Nebraska	67.6	12.2	0.0	1.1	3.5	0.1	15.5
Nevada	56.4	18.6	20.1	3.3	1.6	0.0	0.0
New Hampshire	92.4	1.8	3.0	0.7	0.1	0.0	2.0
New Jersey	35.6	31.0	19.7	2.1	0.3	0.0	11.2
New Mexico	25.1	2.2	50.9	0.6	18.9	0.0	2.3
New York	30.4	21.7	14.3	4.3	1.4	0.0	28.0
North Carolina	43.7	40.6	7.0	0.9	1.7	0.0	6.0
North Dakota	75.7	1.9	0.0	0.4	22.0	0.1	0.0
Ohio	66.0	30.1	2.9	0.6	0.1	0.0	0.2
Oklahoma	62.0	16.4	2.2	0.9	13.1	0.0	5.4
Oregon	73.5	4.3	16.0	2.7	2.3	0.1	1.1
Pennsylvania	59.7	27.3	7.4	1.9	0.1	0.0	3.5
Rhode Island	44.9	8.8	18.2	2.4	0.2	0.0	25.4
South Carolina	40.4	52.7	1.7	0.3	0.2	0.0	4.8
South Dakota	60.6	2.1	1.9	0.6	34.7	0.1	0.1
Tennessee	66.0	27.6	2.1	0.7	0.2	0.0	3.5
Texas	26.6	18.8	51.8	1.3	0.4	0.0	1.1
Utah	71.8	2.1	17.5	3.7	4.2	0.1	0.7
Vermont	59.0	0.7	0.2	0.3	0.2	0.0	39.7
Virginia	45.8	45.9	5.3	2.6	0.2	0.0	0.2
Washington	63.6	6.1	13.3	4.7	2.6	0.3	9.3
West Virginia	94.1	5.3	0.1	0.2	0.0	0.0	0.3
Wisconsin	51.2	16.7	5.3	2.6	1.5	0.1	22.7
Wyoming	78.9	1.8	10.1	0.4	7.8	0.0	0.9

SOURCE: Medicaid Analytic Extract 2002.

TABLE A3.5

INSTITUTIONALIZED MEDICAID ENROLLEES IN 2002

	Number Institutionalized			Percentage Institutionalized		
	All	Aged	Disabled	All	Among Aged	Among Disabled
United States	**1,728,226**	**1,212,384**	**458,879**	**3.2**	**24.4**	**5.5**
Alabama	27,211	20,892	6,314	3.2	20.3	3.3
Alaska	2,035	624	343	1.6	9.3	2.7
Arizona	1,079	545	426	0.1	1.0	0.4
Arkansas	25,655	16,187	6,493	4.0	32.2	5.4
California	123,168	82,078	39,895	1.3	12.2	3.9
Colorado	15,578	12,818	2,679	3.5	26.6	4.0
Connecticut	31,727	25,714	5,868	6.4	40.7	9.5
Delaware	4,050	3,054	833	2.7	27.4	4.6
District of Columbia	5,220	3,264	1,667	3.4	30.9	5.7
Florida	82,709	28,477	54,149	3.0	10.9	10.0
Georgia	41,953	33,514	8,425	2.7	25.1	3.1
Hawaii	11,745	7,961	3,706	5.7	38.6	15.9
Idaho	7,179	4,302	2,012	3.6	33.6	7.3
Illinois	92,870	49,457	39,611	4.4	17.1	13.0
Indiana	47,172	35,146	10,674	5.1	43.7	8.4
Iowa	23,363	17,981	4,613	6.4	45.2	7.3
Kansas	17,516	14,310	2,950	5.6	43.0	5.6
Kentucky	30,568	21,255	6,922	3.9	28.8	3.2
Louisiana	46,845	27,718	16,385	4.5	26.0	9.0
Maine	9,689	7,420	1,668	2.7	10.0	1.5
Maryland	25,875	18,508	5,239	3.3	29.9	4.3
Massachusetts	58,483	43,728	14,204	4.8	38.1	5.6
Michigan	43,807	36,934	6,704	2.8	34.8	2.3
Minnesota	39,239	29,305	8,173	5.6	32.3	8.5
Mississippi	23,938	16,124	6,808	3.3	20.6	4.2
Missouri	40,116	32,405	7,438	3.6	31.7	4.7
Montana	5,929	4,493	1,023	5.5	44.4	5.6
Nebraska	13,421	9,896	2,300	5.0	41.7	7.6
Nevada	5,796	3,770	1,472	2.6	18.8	4.4
New Hampshire	7,570	6,667	649	6.2	48.4	4.0
New Jersey	48,259	33,620	13,384	4.7	29.3	7.1
New Mexico	8,124	5,406	1,774	1.7	22.9	3.2
New York	170,647	115,882	47,464	3.8	28.2	6.8
North Carolina	51,510	39,494	10,721	3.6	21.9	4.4
North Dakota	6,066	4,857	1,109	8.2	47.6	11.1
Ohio	91,283	67,378	22,937	5.0	46.0	7.5
Oklahoma	29,003	20,143	6,107	4.0	30.6	7.0
Oregon	11,945	8,777	2,133	1.8	18.3	3.0
Pennsylvania	86,252	70,949	13,146	5.0	32.9	3.3
Rhode Island	11,822	8,784	2,890	5.7	43.9	7.3
South Carolina	20,696	15,932	4,073	2.2	18.3	3.1
South Dakota	6,550	4,948	1,280	5.6	47.6	7.6
Tennessee	41,567	29,495	9,051	2.5	23.0	2.8
Texas	113,108	80,661	28,616	3.4	20.8	7.1
Utah	6,320	4,143	2,104	2.5	32.8	7.3
Vermont	3,672	3,250	373	2.3	16.5	1.9
Virginia	29,605	23,302	5,812	4.0	23.9	4.1
Washington	22,979	17,829	4,913	2.0	22.1	3.3
West Virginia	13,229	9,425	2,469	3.5	31.5	2.6
Wisconsin	41,390	31,457	8,419	5.1	28.1	5.9
Wyoming	2,693	2,105	461	3.9	39.8	5.2

SOURCE: Medicaid Analytic Extract 2002.

NOTE: Institutionalized enrollees include those receiving Medicaid-covered services in nursing homes, intermediate care facilities for the mentally retarded, mental hospitals for the aged, or inpatient psychiatric facilities for those under age 21 anytime in 2002.

TABLE A3.6
MEDICAID ENROLLMENT IN 2002, BY BASIS OF ELIGIBILITY AND MAINTENANCE ASSISTANCE STATUS (PERCENT)

	Basis of Eligibility				Maintenance Assistance Status				
	Children	Adults	Aged	Disabled	Cash	Medically Needy	Poverty	1115 Waiver*	Other
United States	49.2	25.9	9.3	15.6	36.0	6.4	29.6	10.8	17.2
Alabama	49.2	16.3	12.0	22.5	33.5	0.0	49.3	12.8	4.4
Alaska	63.6	20.8	5.4	10.2	41.5	0.0	50.1	0.0	8.5
Arizona	47.6	37.5	5.0	10.0	42.5	0.0	24.2	15.1	18.1
Arkansas	50.9	22.6	7.8	18.7	26.0	1.8	39.7	24.1	8.4
California	38.7	43.6	7.1	10.6	45.0	10.5	5.6	23.5	15.4
Colorado	54.2	20.2	10.8	14.9	47.3	0.0	37.2	0.0	15.5
Connecticut	53.5	21.4	12.7	12.4	18.0	7.6	16.1	0.0	58.3
Delaware	44.6	36.1	7.4	11.9	46.7	0.0	9.4	15.3	28.7
District of Columbia	50.6	23.4	6.9	19.1	55.9	19.3	19.3	0.0	5.5
Florida	51.0	19.9	9.5	19.7	41.2	2.8	36.5	5.1	14.3
Georgia	57.5	16.8	8.4	17.3	35.1	0.8	45.4	0.0	18.7
Hawaii	45.8	32.9	10.0	11.3	49.3	1.4	22.8	18.6	7.8
Idaho	64.6	15.3	6.4	13.7	27.0	0.0	57.2	0.0	15.8
Illinois	53.8	18.1	13.7	14.5	13.6	18.7	51.1	8.3	8.2
Indiana	59.9	17.5	8.7	13.9	39.5	0.0	37.7	0.0	22.8
Iowa	51.9	19.7	11.0	17.4	42.4	2.9	31.3	0.0	23.4
Kansas	56.5	15.9	10.7	17.0	35.9	3.3	43.7	0.0	17.2
Kentucky	48.7	14.4	9.4	27.6	45.2	4.4	40.0	0.0	10.3
Louisiana	61.6	10.8	10.2	17.4	33.8	1.2	53.8	0.0	11.3
Maine	29.1	19.0	20.6	31.4	18.4	1.0	26.9	34.3	19.4
Maryland	55.7	21.0	7.8	15.4	26.6	11.5	41.6	13.2	7.1
Massachusetts	40.1	29.6	9.5	20.8	24.9	1.7	38.4	22.5	12.5
Michigan	54.6	19.4	6.8	19.1	28.6	8.3	34.3	0.0	28.8
Minnesota	50.5	22.7	13.0	13.8	35.2	7.8	6.7	17.5	32.9
Mississippi	54.6	12.0	10.9	22.5	43.3	0.0	53.1	0.0	3.6
Missouri	53.5	23.4	9.1	14.1	62.7	0.0	11.3	10.5	15.5
Montana	53.0	20.8	9.3	16.9	43.9	8.3	24.6	0.0	23.3
Nebraska	60.7	19.2	8.8	11.3	23.7	16.0	49.8	0.0	10.4
Nevada	53.8	21.7	9.2	15.4	61.3	0.0	23.2	0.0	15.6
New Hampshire	61.4	14.1	11.2	13.2	21.6	9.3	47.4	0.0	21.7
New Jersey	49.5	20.9	11.3	18.4	36.5	0.5	38.6	10.1	14.3
New Mexico	62.7	20.3	5.1	11.9	40.7	0.0	43.6	10.2	5.5
New York	42.1	33.5	9.1	15.4	43.3	19.1	10.0	12.6	15.0
North Carolina	51.4	18.8	12.6	17.2	43.0	3.2	48.9	0.0	4.9
North Dakota	47.0	25.6	13.9	13.6	49.1	20.2	7.6	0.0	23.0
Ohio	53.7	21.6	8.0	16.7	23.6	0.0	21.8	0.0	54.6
Oklahoma	65.0	13.7	9.2	12.1	18.8	1.1	69.1	0.0	11.1
Oregon	40.9	40.9	7.4	10.9	22.5	1.4	27.2	28.0	20.9
Pennsylvania	48.2	16.6	12.4	22.7	40.8	6.6	33.9	0.0	18.7
Rhode Island	45.8	25.3	9.7	19.1	39.9	2.1	14.8	20.0	23.3
South Carolina	52.3	24.2	9.3	14.2	31.9	0.0	44.9	10.8	12.4
South Dakota	60.8	15.9	8.9	14.4	35.4	0.0	43.3	0.0	21.4
Tennessee	43.5	29.6	7.7	19.2	30.0	10.3	15.3	34.4	10.0
Texas	59.8	16.7	11.6	12.0	28.6	2.7	51.0	0.0	17.7
Utah	56.7	26.7	5.0	11.5	35.0	1.9	36.9	4.4	21.7
Vermont	43.8	31.4	12.5	12.3	18.2	8.6	30.9	32.3	10.0
Virginia	54.4	13.3	13.2	19.1	19.7	1.2	58.9	0.0	20.2
Washington	53.7	26.1	7.1	13.0	24.3	1.5	35.6	7.4	31.2
West Virginia	50.4	16.2	7.9	25.5	33.4	1.5	55.8	0.0	9.3
Wisconsin	44.8	24.0	13.8	17.4	32.8	5.0	15.5	23.9	22.8
Wyoming	61.8	18.0	7.6	12.6	27.6	0.0	53.8	0.0	18.6

SOURCE: Medicaid Analytic Extract 2002.

* 1115 waiver maintenance assistance status includes people only eligible for Medicaid via a state 1115 waiver program.

TABLE A3.7

PERCENTAGE OF ENROLLEES IN MAINTENANCE ASSISTANCE CATEGORY IN 2002, BY BASIS OF ELIGIBILITY

	Children					Adults					Aged					Disabled				
	Cash	MN	Pov	Waiv	Oth	Cash	MN	Pov	Waiv	Oth	Cash	MN	Pov	Waiv	Oth	Cash	MN	Pov	Waiv	Oth
United States	**29.5**	**4.3**	**47.7**	**2.7**	**15.8**	**28.0**	**7.7**	**9.3**	**33.1**	**21.9**	**33.6**	**14.1**	**21.8**	**6.8**	**23.7**	**71.6**	**6.4**	**10.9**	**1.6**	**9.6**
Alabama	18.1	0.0	77.2	3.0	1.7	18.8	0.0	11.4	69.8	0.0	24.1	0.0	55.5	0.0	20.4	82.6	0.0	12.5	0.0	4.9
Alaska	23.7	0.0	68.3	0.0	8.0	60.3	0.0	31.0	0.0	8.7	85.7	0.0	1.3	0.0	13.0	90.4	0.0	1.1	0.0	8.5
Arizona	39.5	0.0	41.6	0.5	18.4	40.8	0.0	4.9	39.8	14.5	25.9	0.0	34.6	0.0	39.5	71.5	0.0	8.7	0.0	19.8
Arkansas	11.5	0.8	61.2	21.7	4.8	14.4	3.5	19.4	57.9	4.8	29.1	0.9	26.3	0.0	43.7	77.9	3.1	11.3	0.0	7.6
California	56.1	13.3	9.2	4.2	17.2	24.2	5.0	2.1	50.1	18.5	55.1	29.6	9.5	0.0	5.8	83.1	10.4	4.3	0.0	2.2
Colorado	34.3	0.0	53.7	0.0	12.0	53.1	0.0	26.2	0.0	20.7	57.6	0.0	13.6	0.0	28.8	79.2	0.0	9.1	0.0	11.6
Connecticut	18.6	0.7	21.9	0.0	58.8	16.0	0.9	5.7	0.0	77.4	10.1	19.7	17.8	0.0	52.3	26.5	36.6	7.3	0.0	29.6
Delaware	57.3	0.0	8.8	0.2	33.8	31.4	0.0	0.8	42.0	25.8	24.6	0.0	44.1	0.0	31.3	66.9	0.0	16.2	0.0	16.9
District of Columbia	46.5	17.1	29.3	0.0	7.1	69.2	23.8	1.8	0.0	5.2	29.5	31.7	31.2	0.0	7.6	74.3	15.1	9.8	0.0	0.8
Florida	30.9	1.0	51.9	0.3	15.9	38.8	8.7	9.3	24.9	18.3	41.4	0.1	52.2	0.5	5.8	70.2	2.9	16.5	0.0	10.4
Georgia	23.4	0.0	58.9	0.0	17.7	42.2	0.0	36.0	0.0	21.9	25.2	3.8	40.0	0.0	31.0	71.7	3.0	12.2	0.0	13.1
Hawaii	54.7	0.0	32.3	1.0	12.0	40.3	0.0	0.0	52.7	7.0	39.2	11.3	49.3	0.0	0.3	62.4	2.7	27.4	7.3	0.2
Idaho	13.5	0.0	77.3	0.0	9.2	31.7	0.0	37.4	0.0	30.9	16.7	0.0	13.2	0.0	70.1	90.0	0.0	5.3	0.0	4.7
Illinois	8.3	0.3	81.9	0.5	9.0	5.1	68.2	14.6	0.2	11.9	7.8	20.2	10.7	58.6	2.7	49.7	24.2	20.2	0.0	5.8
Indiana	29.7	0.0	54.8	0.0	15.5	64.1	0.0	13.9	0.0	22.0	23.2	0.0	13.3	0.0	63.5	60.8	0.0	9.0	0.0	30.2
Iowa	34.1	0.6	47.7	0.0	17.6	60.8	6.2	17.9	0.0	15.1	15.6	6.4	17.9	0.0	60.2	63.1	3.9	6.2	0.0	26.8
Kansas	24.1	1.3	63.2	0.0	11.3	55.9	4.9	26.0	0.0	13.1	21.8	4.8	17.1	0.0	56.3	65.0	7.2	11.9	0.0	15.9
Kentucky	25.1	3.7	63.3	0.0	8.0	46.8	11.8	26.5	0.0	14.9	27.7	4.7	32.9	0.0	34.7	85.9	1.8	8.5	0.0	3.9
Louisiana	15.7	0.1	73.0	0.0	11.2	52.8	6.5	36.7	0.0	4.0	41.1	1.6	31.8	0.0	25.5	81.4	1.6	9.3	0.0	7.7
Maine	6.1	0.3	71.3	0.0	22.3	29.4	0.4	3.0	11.8	55.4	13.4	1.0	13.1	67.0	5.6	26.5	2.1	9.3	58.2	3.9
Maryland	16.5	6.5	69.6	0.1	7.3	19.4	11.9	8.5	48.6	11.7	30.3	34.7	8.7	26.2	0.0	71.0	17.5	2.5	5.4	3.7
Massachusetts	15.8	0.0	72.4	0.9	10.9	9.9	0.0	0.0	70.0	20.1	25.9	9.3	43.3	0.0	21.5	63.2	3.9	25.6	6.6	0.8
Michigan	17.9	5.2	53.9	0.0	23.0	22.3	23.0	17.0	0.0	37.6	19.7	7.2	12.4	0.0	60.7	68.4	2.9	4.0	0.0	24.7
Minnesota	31.7	1.7	9.2	25.0	32.5	35.6	6.1	2.4	21.6	34.4	19.7	29.7	9.1	0.0	41.5	61.8	12.1	2.4	0.0	23.7
Mississippi	27.8	0.0	71.3	0.0	0.8	65.2	0.0	34.5	0.0	0.3	27.8	0.0	49.7	0.0	22.5	76.8	0.0	20.2	0.0	3.0
Missouri	63.5	0.0	14.1	15.7	6.6	82.1	0.0	8.6	9.1	0.3	21.9	0.0	11.6	0.0	66.5	53.5	0.0	5.0	0.0	41.5
Montana	35.2	0.1	38.1	0.0	26.6	51.5	0.0	15.9	0.0	32.6	19.0	59.9	8.4	0.0	12.6	75.5	15.5	1.8	0.0	7.3
Nebraska	17.0	6.2	64.6	0.0	12.2	26.6	39.5	19.1	0.0	14.9	18.7	44.2	37.0	0.0	0.1	58.8	7.0	32.4	0.0	1.7
Nevada	58.7	0.0	27.1	0.0	14.2	70.0	0.0	10.9	0.0	19.1	37.9	0.0	36.6	0.0	25.5	71.9	0.0	18.6	0.0	9.5
New Hampshire	16.5	1.9	68.6	0.0	13.0	34.2	11.9	19.2	0.0	34.6	11.2	36.4	13.6	0.0	38.9	40.8	17.8	7.9	0.0	33.5
New Jersey	29.4	0.0	61.2	0.0	9.4	26.5	0.0	8.8	48.2	16.5	30.6	3.8	32.8	0.0	32.8	70.9	0.6	15.2	0.0	13.4
New Mexico	28.6	0.0	62.7	4.6	4.1	50.2	0.0	8.9	36.1	4.7	41.8	0.0	29.8	0.0	28.4	87.4	0.0	8.3	0.0	4.3
New York	48.6	18.1	23.5	0.0	9.8	21.0	10.6	0.1	37.6	30.7	42.7	50.6	0.9	0.0	5.8	77.9	21.5	0.1	0.0	0.4
North Carolina	30.0	0.6	63.1	0.0	6.4	63.3	4.5	23.7	0.0	8.4	37.7	11.4	50.9	0.0	0.1	63.4	3.7	32.8	0.0	0.1
North Dakota	51.2	8.1	9.8	0.0	30.9	54.6	10.4	1.7	0.0	33.2	20.0	66.8	13.2	0.0	0.0	61.5	32.9	5.6	0.0	0.0
Ohio	14.8	0.0	32.5	0.0	52.6	13.4	0.0	9.9	0.0	76.6	25.1	0.0	8.2	0.0	66.7	64.1	0.0	9.0	0.0	26.9
Oklahoma	6.0	0.3	89.8	0.0	3.9	38.1	3.6	40.6	0.0	17.7	27.8	1.2	25.4	0.0	45.6	58.7	2.2	22.9	0.0	16.2
Oregon	21.8	0.0	57.3	0.0	20.9	10.3	0.0	5.1	68.6	16.0	28.1	4.5	14.8	0.0	52.5	67.3	9.4	5.7	0.0	17.6
Pennsylvania	31.7	3.5	46.1	0.0	18.7	39.5	17.4	9.8	0.0	33.2	32.6	13.6	31.9	0.0	21.9	65.5	1.3	26.7	0.0	6.4
Rhode Island	34.0	0.0	26.2	24.9	14.8	29.5	0.0	2.7	34.0	33.9	24.9	17.1	13.6	0.0	44.4	75.3	2.2	3.9	0.0	18.6
South Carolina	20.9	0.0	67.5	0.4	11.2	32.2	0.0	9.5	43.9	14.4	37.2	0.0	40.4	0.0	22.4	68.5	0.0	24.5	0.0	7.0
South Dakota	23.5	0.0	58.2	0.0	18.2	52.3	0.0	23.2	0.0	24.5	20.5	0.0	27.3	0.0	52.2	75.7	0.0	12.1	0.0	12.2
Tennessee	21.2	10.1	30.1	26.1	12.6	11.1	12.5	4.4	62.8	9.2	23.4	18.6	9.7	28.8	19.5	81.8	4.4	0.8	11.4	1.6
Texas	15.9	0.2	69.8	0.0	14.1	24.8	15.6	35.9	0.1	23.6	45.0	0.0	20.2	0.0	34.9	81.4	0.0	8.3	0.0	10.4
Utah	30.5	0.9	45.2	0.0	23.4	39.4	2.3	25.6	16.5	16.2	26.3	5.9	31.2	0.0	36.6	51.0	4.7	24.7	0.0	19.5
Vermont	14.3	3.6	66.9	4.8	10.3	9.3	9.4	4.8	69.9	6.6	9.2	16.4	0.0	55.3	19.1	64.3	16.2	0.1	10.7	8.7
Virginia	0.3	0.1	85.6	0.0	14.0	4.0	0.1	35.7	0.1	60.2	39.0	3.7	32.3	0.0	25.0	72.4	3.3	17.6	0.0	6.6
Washington	15.4	0.0	51.8	0.0	32.8	14.7	0.0	23.6	28.2	33.5	35.5	8.7	13.0	0.0	42.7	73.9	6.7	5.7	0.0	13.6
West Virginia	0.2	0.0	95.9	0.0	3.9	52.0	3.2	26.6	0.0	18.3	53.6	2.0	20.2	0.0	24.2	80.7	3.3	6.3	0.0	9.7
Wisconsin	29.0	6.8	29.5	12.9	21.8	27.0	1.3	5.0	47.7	19.0	12.1	6.5	3.1	48.3	30.0	67.1	4.1	4.1	0.0	24.7
Wyoming	18.2	0.0	71.8	0.0	10.0	44.1	0.0	30.4	0.0	25.6	17.3	0.0	31.0	0.0	51.7	56.6	0.0	12.8	0.0	30.6

SOURCE: Medicaid Analytic Extract 2002.

MN = medically needy; Pov = poverty; Waiv = 1115 waiver; Oth = other.

TABLE A3.8

MEDICAID ENROLLMENT TRENDS, 1999-2002, BY BASIS OF ELIGIBILITY

	Children			Adults			Aged			Disabled		
	Percentage of Population		% Change	Percentage of Population		% Change	Percentage of Population		% Change	Percentage of Population		% Change
	1999	2002	1999-2002	1999	2002	1999-2002	1999	2002	1999-2002	1999	2002	1999-2002
United States	**7.6**	**9.1**	**19.3**	**3.5**	**4.8**	**38.2**	**1.5**	**1.7**	**13.5**	**2.6**	**2.9**	**9.1**
Alabama	7.8	9.4	20.9	1.2	3.1	162.9	1.9	2.3	22.3	4.0	4.3	9.0
Alaska	9.9	12.4	24.9	4.1	4.0	-1.0	1.0	1.0	8.3	1.7	2.0	18.6
Arizona	7.4	10.0	35.7	3.1	7.8	155.9	0.6	1.0	61.0	1.8	2.1	13.9
Arkansas	8.6	12.1	40.2	3.9	5.4	38.7	2.1	1.9	-11.5	3.9	4.5	14.4
California	9.5	10.5	11.0	7.8	11.9	53.5	1.7	1.9	10.8	2.8	2.9	4.6
Colorado	4.4	5.4	22.9	1.5	2.0	34.9	1.1	1.1	1.6	1.5	1.5	-4.0
Connecticut	6.9	7.7	12.1	2.2	3.1	42.5	1.6	1.8	10.7	1.7	1.8	6.5
Delaware	7.2	8.3	15.9	4.8	6.7	41.6	1.1	1.4	25.5	2.0	2.2	10.8
District of Columbia	13.0	13.7	5.6	5.8	6.3	8.9	1.7	1.9	8.0	5.2	5.2	-1.4
Florida	6.7	8.4	25.3	2.5	3.3	28.3	1.3	1.6	18.7	2.8	3.2	16.2
Georgia	8.8	10.6	20.2	2.6	3.1	20.2	1.4	1.6	12.5	2.7	3.2	16.8
Hawaii	7.3	7.7	4.6	5.8	5.5	-4.9	1.5	1.7	8.4	1.8	1.9	5.4
Idaho	6.2	9.6	53.5	1.6	2.3	42.1	0.9	1.0	11.6	1.8	2.0	12.8
Illinois	7.6	9.0	18.5	3.0	3.0	1.8	1.0	2.3	137.1	2.3	2.4	3.4
Indiana	6.7	8.9	33.7	1.9	2.6	39.8	1.2	1.3	5.9	1.7	2.1	21.5
Iowa	5.3	6.4	22.2	2.2	2.4	11.6	1.3	1.4	2.4	2.0	2.2	8.6
Kansas	5.2	6.5	24.5	1.4	1.8	29.0	1.1	1.2	9.0	1.8	1.9	5.3
Kentucky	7.9	9.4	19.1	2.5	2.8	10.5	1.8	1.8	1.2	4.9	5.3	8.1
Louisiana	9.5	14.4	51.9	2.3	2.5	9.0	2.1	2.4	13.4	3.7	4.1	8.9
Maine	7.2	8.1	11.4	3.1	5.3	67.8	1.9	5.7	196.9	3.8	8.7	126.1
Maryland	7.1	8.1	14.4	2.8	3.0	9.0	1.0	1.1	10.1	2.2	2.2	2.8
Massachusetts	7.0	7.6	8.8	4.6	5.6	21.4	1.7	1.8	4.0	3.5	3.9	12.2
Michigan	7.3	8.4	15.4	2.4	3.0	25.6	1.0	1.1	4.8	2.8	3.0	4.0
Minnesota	6.3	7.0	10.7	2.9	3.1	9.5	1.3	1.8	39.6	1.7	1.9	14.3
Mississippi	9.8	13.7	38.8	2.0	3.0	49.0	2.3	2.7	16.8	5.4	5.6	4.8
Missouri	8.9	10.6	19.6	3.1	4.6	50.1	1.8	1.8	-1.7	2.3	2.8	19.8
Montana	5.5	6.3	15.1	2.3	2.5	9.7	1.1	1.1	2.4	1.9	2.0	6.2
Nebraska	7.7	9.4	23.0	2.6	3.0	16.5	1.3	1.4	3.1	1.7	1.8	6.1
Nevada	3.8	5.4	42.8	1.3	2.2	71.1	0.8	0.9	13.0	1.3	1.6	19.2
New Hampshire	5.3	5.9	12.0	1.3	1.4	1.3	1.0	1.1	4.1	1.1	1.3	15.9
New Jersey	5.3	5.9	10.9	1.7	2.5	44.3	1.4	1.3	-2.8	2.0	2.2	9.2
New Mexico	13.5	15.7	16.9	3.6	5.1	42.5	1.2	1.3	5.7	2.7	3.0	10.8
New York	7.9	9.9	26.1	4.6	7.9	73.3	2.1	2.1	4.2	3.5	3.6	3.1
North Carolina	7.6	8.8	15.4	2.6	3.2	24.0	2.2	2.2	-2.5	2.8	3.0	6.6
North Dakota	4.8	5.5	12.6	1.8	3.0	63.8	1.5	1.6	7.9	1.4	1.6	9.8
Ohio	6.7	8.6	29.9	2.0	3.5	75.6	1.3	1.3	-0.9	2.3	2.7	17.2
Oklahoma	9.2	13.4	46.1	2.4	2.8	17.3	1.8	1.9	2.9	2.1	2.5	18.1
Oregon	6.9	7.5	9.8	6.2	7.5	20.8	1.2	1.4	13.5	1.7	2.0	14.6
Pennsylvania	6.6	6.8	3.5	2.9	2.3	-18.2	1.6	1.7	6.6	2.8	3.2	15.1
Rhode Island	7.5	8.9	18.6	3.9	4.9	25.0	1.7	1.9	7.5	3.2	3.7	17.0
South Carolina	9.6	11.9	24.0	4.5	5.5	22.6	2.0	2.1	5.9	3.0	3.2	7.8

TABLE A3.8

MEDICAID ENROLLMENT TRENDS, 1999-2002, BY BASIS OF ELIGIBILITY

	Children			Adults			Aged			Disabled		
	Percentage of Population		% Change	Percentage of Population		% Change	Percentage of Population		% Change	Percentage of Population		% Change
	1999	2002	1999-2002	1999	2002	1999-2002	1999	2002	1999-2002	1999	2002	1999-2002
South Dakota	7.3	9.4	29.2	2.0	2.5	25.0	1.3	1.4	1.5	2.1	2.2	4.0
Tennessee	11.7	12.5	6.7	8.3	8.5	2.6	1.7	2.2	31.8	5.7	5.5	-3.4
Texas	7.5	9.2	22.5	2.2	2.6	16.5	1.7	1.8	3.8	1.7	1.9	8.8
Utah	5.4	6.1	12.5	2.1	2.9	35.3	0.5	0.5	3.9	1.1	1.2	9.7
Vermont	10.5	11.3	7.1	7.2	8.1	13.0	2.9	3.2	11.8	2.9	3.2	7.1
Virginia	5.3	5.5	4.3	1.4	1.4	-3.1	1.4	1.3	-1.7	1.9	1.9	2.3
Washington	9.0	10.0	11.2	3.1	4.9	56.6	1.2	1.3	10.4	2.1	2.4	16.8
West Virginia	9.7	10.5	8.1	3.7	3.4	-7.5	1.8	1.7	-6.8	4.6	5.3	16.1
Wisconsin	5.0	6.7	32.8	2.1	3.6	69.9	1.2	2.1	75.5	2.5	2.6	5.7
Wyoming	5.8	8.7	49.4	2.2	2.5	16.8	1.0	1.1	8.7	1.7	1.8	5.4

SOURCE: Medicaid Analytic Extract 1999-2002; U.S. Census Bureau.

TABLE A3.9

EVER DUALLY ENROLLED IN MEDICARE AND MEDICAID IN 2002

	Total # of Dual Enrollees	% of Medicaid Enrollees Who Are Duals			% of Medicare Enrollees Who Are Duals
		All	Aged	Disabled	
United States	**8,028,514**	**15.1**	**91.8**	**41.0**	**20.7**
Alabama	186,202	21.7	98.1	43.5	27.1
Alaska	11,564	9.3	91.0	42.3	27.6
Arizona	103,266	9.1	91.3	37.5	15.3
Arkansas	94,752	14.7	91.6	39.8	21.9
California	1,009,825	10.6	85.4	41.8	25.7
Colorado	71,944	16.1	90.9	41.8	15.3
Connecticut	92,449	18.6	92.7	51.9	17.9
Delaware	18,734	12.5	95.1	39.3	16.3
District of Columbia	18,827	12.3	88.6	30.8	25.0
Florida	487,635	17.8	90.8	46.1	17.2
Georgia	239,133	15.1	93.3	41.6	25.8
Hawaii	28,102	13.6	91.0	38.8	16.8
Idaho	22,964	11.5	97.9	37.7	13.8
Illinois	378,072	18.0	85.1	42.3	23.2
Indiana	134,833	14.7	96.0	44.5	15.9
Iowa	69,150	19.0	95.8	48.4	14.6
Kansas	55,795	17.9	96.5	44.4	14.4
Kentucky	153,609	19.5	95.8	37.7	24.8
Louisiana	158,771	15.2	95.7	30.9	26.5
Maine	91,296	25.4	79.7	26.8	42.2
Maryland	103,490	13.1	90.5	35.4	16.0
Massachusetts	226,168	18.7	90.7	47.2	23.5
Michigan	224,684	14.5	95.3	41.0	16.0
Minnesota	131,924	19.0	95.6	45.5	20.1
Mississippi	149,857	20.9	98.2	45.1	35.8
Missouri	169,094	15.0	93.9	44.5	19.7
Montana	18,333	16.9	97.3	40.9	13.4
Nebraska	38,242	14.3	94.7	51.5	15.0
Nevada	32,682	14.9	94.5	40.0	13.3
New Hampshire	22,774	18.6	93.6	55.9	13.5
New Jersey	187,354	18.4	88.4	45.1	15.5
New Mexico	44,589	9.6	95.2	39.2	19.1
New York	622,548	13.8	84.8	37.6	23.1
North Carolina	283,131	19.9	97.9	42.5	25.0
North Dakota	15,328	20.8	96.5	54.0	15.1
Ohio	250,596	13.7	92.5	36.4	14.7
Oklahoma	99,518	13.9	94.7	41.0	19.6
Oregon	82,672	12.8	97.7	47.9	16.7
Pennsylvania	325,144	18.8	93.4	31.1	15.6
Rhode Island	36,722	17.8	95.5	41.6	21.6
South Carolina	138,134	14.8	94.9	41.1	24.2
South Dakota	18,758	16.0	98.0	49.8	15.9
Tennessee	283,764	17.1	96.8	47.0	34.2
Texas	521,498	15.5	97.8	34.7	23.0
Utah	23,517	9.4	86.8	42.1	11.3
Vermont	30,585	19.3	97.4	56.2	34.3
Virginia	148,244	20.0	90.6	41.9	16.5
Washington	123,511	10.9	86.8	35.6	16.8
West Virginia	59,881	15.9	96.3	31.7	17.7
Wisconsin	179,708	22.1	97.9	47.1	23.2
Wyoming	9,141	13.1	97.9	44.2	13.9

SOURCES: Medicaid Analytic Extract 2002; 2002 Medicare and Medicaid Statistical Supplement.

TABLE A3.10

MEDICAID ENROLLEES RECEIVING ONLY RESTRICTED MEDICAID BENEFITS IN 2002

	Number				Percentage			
	Total	Family Planning Only	Unqualified Aliens	Restricted-Benefit Duals	Total	Family Planning Only	Unqualified Aliens	Restricted-Benefit Duals
United States	**4,836,122**	**2,739,454**	**1,160,920**	**935,748**	**9.1**	**5.1**	**2.2**	**1.8**
Alabama	169,682	91,316	0	78,366	19.8	10.6	0.0	9.1
Alaska	133	0	2	131	0.1	0.0	0.0	0.1
Arizona	36,080	8,023	15,310	12,747	3.2	0.7	1.3	1.1
Arkansas	99,092	80,377	0	18,715	15.4	12.5	0.0	2.9
California	3,141,740	2,238,737	892,549	10,454	32.9	23.5	9.4	0.1
Colorado	18,808	0	6,858	11,950	4.2	0.0	1.5	2.7
Connecticut	13,481	0	0	13,481	2.7	0.0	0.0	2.7
Delaware	13,893	2,063	4,692	7,138	9.3	1.4	3.1	4.8
District of Columbia	2,748	0	1,333	1,415	1.8	0.0	0.9	0.9
Florida	174,753	76,572	10,515	87,666	6.4	2.8	0.4	3.2
Georgia	75,346	0	957	74,389	4.8	0.0	0.1	4.7
Hawaii	1,358	0	0	1,358	0.7	0.0	0.0	0.7
Idaho	2,707	0	0	2,707	1.4	0.0	0.0	1.4
Illinois	18,674	0	0	18,674	0.9	0.0	0.0	0.9
Indiana	35,546	0	16,628	18,918	3.9	0.0	1.8	2.1
Iowa	10,014	0	747	9,267	2.8	0.0	0.2	2.6
Kansas	10,883	0	1,711	9,172	3.5	0.0	0.6	2.9
Kentucky	39,948	0	0	39,948	5.1	0.0	0.0	5.1
Louisiana	45,998	0	452	45,546	4.4	0.0	0.0	4.4
Maine	705	0	130	575	0.2	0.0	0.0	0.2
Maryland	61,991	43,320	0	18,671	7.9	5.5	0.0	2.4
Massachusetts	19,787	0	102	19,685	1.6	0.0	0.0	1.6
Michigan	43,247	0	25,784	17,463	2.8	0.0	1.7	1.1
Minnesota	16,111	0	7,217	8,894	2.3	0.0	1.0	1.3
Mississippi	4,605	0	0	4,605	0.6	0.0	0.0	0.6
Missouri	22,698	9,571	0	13,127	2.0	0.8	0.0	1.2
Montana	1,053	0	0	1,053	1.0	0.0	0.0	1.0
Nebraska	2,066	0	0	2,066	0.8	0.0	0.0	0.8
Nevada	13,116	0	251	12,865	6.0	0.0	0.1	5.9
New Hampshire	2,383	0	0	2,383	1.9	0.0	0.0	1.9
New Jersey	35,828	0	9,160	26,668	3.5	0.0	0.9	2.6
New Mexico	37,146	25,632	1,535	9,979	8.0	5.5	0.3	2.1
New York	15,527	898	9,816	4,813	0.3	0.0	0.2	0.1
North Carolina	45,888	0	10,826	35,062	3.2	0.0	0.8	2.5
North Dakota	1,584	0	7	1,577	2.2	0.0	0.0	2.1
Ohio	30,961	0	0	30,961	1.7	0.0	0.0	1.7
Oklahoma	12,201	0	3,621	8,580	1.7	0.0	0.5	1.2
Oregon	45,468	0	36,220	9,248	7.0	0.0	5.6	1.4
Pennsylvania	37,374	0	13	37,361	2.2	0.0	0.0	2.2
Rhode Island	4,035	137	219	3,679	2.0	0.1	0.1	1.8
South Carolina	95,835	83,806	313	11,716	10.3	9.0	0.0	1.3
South Dakota	4,676	0	0	4,676	4.0	0.0	0.0	4.0
Tennessee	13,002	0	0	13,002	0.8	0.0	0.0	0.8
Texas	185,486	0	79,408	106,078	5.5	0.0	2.4	3.2
Utah	6,558	0	4,828	1,730	2.6	0.0	1.9	0.7
Vermont	0	0	0	0	0.0	0.0	0.0	0.0
Virginia	41,546	1	5,189	36,356	5.6	0.0	0.7	4.9
Washington	104,057	79,001	11,391	13,665	9.2	7.0	1.0	1.2
West Virginia	10,646	0	0	10,646	2.8	0.0	0.0	2.8
Wisconsin	6,607	0	2,702	3,905	0.8	0.0	0.3	0.5
Wyoming	3,051	0	434	2,617	4.4	0.0	0.6	3.7

SOURCE: Medicaid Analytic Extract 2002.

NOTE: Table A3.10 includes only enrollees with limited Medicaid benefits during their entire period of enrollment in 2002.

Dual = enrolled in both Medicare and Medicaid in at least one month in 2002.

TABLE A3.11

EVER ENROLLED IN MANAGED CARE IN 2002, OVERALL AND BY TYPE OF PLAN

	Number				Percentage			
		Type of Plan				Type of Plan		
	Overall	HMO/HIO	PHP or PHP/PCCM Only	PCCM Only	Overall	HMO/ HIO	PHP or PHP/PCCM Only	PCCM Only
United States	32,457,077	20,387,063	6,548,921	5,521,093	61.0	38.3	12.3	10.4
Alabama	585,320	4,388	531,316	49,616	68.1	0.5	61.8	5.8
Alaska	0	0	0	0	0.0	0.0	0.0	0.0
Arizona	979,210	937,665	41,545	0	85.9	82.3	3.6	0.0
Arkansas	348,245	0	0	348,245	54.0	0.0	0.0	54.0
California	6,235,100	3,921,073	2,314,027	0	65.4	41.1	24.3	0.0
Colorado	414,358	235,305	178,703	350	92.6	52.6	39.9	0.1
Connecticut	350,392	350,392	0	0	70.5	70.5	0.0	0.0
Delaware	134,930	119,723	15,200	7	89.8	79.7	10.1	0.0
District of Columbia	103,926	103,926	0	0	68.1	68.1	0.0	0.0
Florida	1,818,211	966,941	99,977	751,293	66.2	35.2	3.6	27.4
Georgia	1,009,892	0	0	1,009,892	63.8	0.0	0.0	63.8
Hawaii	160,540	160,020	520	0	77.7	77.5	0.3	0.0
Idaho	93,949	0	0	93,949	47.1	0.0	0.0	47.1
Illinois	207,067	180,807	26,260	0	9.8	8.6	1.2	0.0
Indiana	644,672	317,049	0	327,623	70.2	34.5	0.0	35.7
Iowa	306,292	94,790	211,501	1	84.3	26.1	58.2	0.0
Kansas	245,956	122,341	18	123,597	79.1	39.3	0.0	39.7
Kentucky	738,649	150,090	572,228	16,331	93.6	19.0	72.5	2.1
Louisiana	376,082	0	0	376,082	36.0	0.0	0.0	36.0
Maine	141,438	0	0	141,438	39.3	0.0	0.0	39.3
Maryland	581,057	581,057	0	0	73.6	73.6	0.0	0.0
Massachusetts	830,767	369,156	458,289	3,322	68.6	30.5	37.9	0.3
Michigan	1,548,615	1,031,625	516,990	0	100.0	66.6	33.4	0.0
Minnesota	465,513	465,513	0	0	67.0	67.0	0.0	0.0
Mississippi	330,657	0	0	330,657	46.1	0.0	0.0	46.1
Missouri	509,446	509,446	0	0	45.1	45.1	0.0	0.0
Montana	76,934	0	0	76,934	70.8	0.0	0.0	70.8
Nebraska	213,778	43,418	170,360	0	79.7	16.2	63.5	0.0
Nevada	106,333	106,333	0	0	48.5	48.5	0.0	0.0
New Hampshire	14,418	13,875	543	0	11.8	11.3	0.4	0.0
New Jersey	735,655	693,043	42,612	0	72.2	68.0	4.2	0.0
New Mexico	317,515	317,515	0	0	68.2	68.2	0.0	0.0
New York	1,718,335	1,681,842	10,183	26,310	38.0	37.1	0.2	0.6
North Carolina	999,171	34,485	0	964,686	70.1	2.4	0.0	67.7
North Dakota	48,198	1,178	0	47,020	65.5	1.6	0.0	63.9
Ohio	535,054	535,054	0	0	29.1	29.1	0.0	0.0
Oklahoma	540,292	315,229	223,606	1,457	75.2	43.9	31.1	0.2
Oregon	573,751	429,277	144,222	252	88.5	66.2	22.2	0.0
Pennsylvania	1,374,358	1,204,383	736	169,239	79.4	69.5	0.0	9.8
Rhode Island	152,330	152,330	0	0	73.7	73.7	0.0	0.0
South Carolina	89,802	66,751	23,051	0	9.6	7.2	2.5	0.0
South Dakota	117,356	0	117,356	0	100.0	0.0	100.0	0.0
Tennessee	1,652,833	1,550,304	102,529	0	99.6	93.4	6.2	0.0
Texas	1,466,881	988,717	136,161	342,003	43.7	29.4	4.1	10.2
Utah	223,690	138,163	85,524	3	89.2	55.1	34.1	0.0
Vermont	107,135	0	0	107,135	67.6	0.0	0.0	67.6
Virginia	468,083	374,499	0	93,584	63.3	50.6	0.0	12.7
Washington	1,129,529	621,078	508,441	10	99.9	54.9	45.0	0.0
West Virginia	197,083	77,026	0	120,057	52.2	20.4	0.0	31.8
Wisconsin	438,279	421,256	17,023	0	53.9	51.8	2.1	0.0
Wyoming	0	0	0	0	0.0	0.0	0.0	0.0

SOURCE: Medicaid Analytic Extract 2002.

HMO/HIO = health maintenance organization or health insuring organization; PCCM = primary care case management;
PHP = prepaid health plan.

TABLE A3.12

MANAGED CARE ENROLLMENT TRENDS, 1999-2002

	Percentage Ever Enrolled in HMO/HIO					Percentage Ever Enrolled in HMO/HIO or PHP				
	1999	2000	2001	2002	% Change 1999-2002	1999	2000	2001	2002	% Change 1999-2002
United States	38.4	36.7	36.8	38.3	-0.2	50.4	48.6	48.4	50.6	0.3
Alabama	8.2	0.6	0.5	0.5	-93.8	75.5	63.8	63.1	62.4	-17.4
Alaska	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Arizona	81.0	80.9	83.0	82.3	1.6	100.0	85.7	87.2	85.9	-14.1
Arkansas	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
California	44.4	41.6	40.9	41.1	-7.5	76.2	68.1	66.6	65.4	-14.3
Colorado	39.4	43.7	46.6	52.6	33.4	86.6	89.5	88.4	92.6	6.9
Connecticut	69.0	68.9	69.1	70.5	2.1	69.0	68.9	69.1	70.5	2.1
Delaware	82.4	79.9	79.9	79.7	-3.2	82.4	79.9	79.9	89.8	9.1
District of Columbia	64.9	67.0	66.6	68.1	4.9	64.9	67.0	66.6	68.1	4.9
Florida	36.1	31.1	32.7	35.2	-2.4	38.0	33.7	36.3	38.9	2.3
Georgia	2.3	0.0	0.0	0.0	-100.0	2.3	0.0	0.0	0.0	-100.0
Hawaii	78.8	78.9	78.2	77.5	-1.8	79.1	79.2	78.6	77.7	-1.8
Idaho	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Illinois	13.3	11.3	10.6	8.6	-35.6	14.9	12.2	11.7	9.8	-33.8
Indiana	19.5	22.4	21.7	34.5	76.6	19.5	22.4	21.7	34.5	76.6
Iowa	28.8	28.6	29.6	26.1	-9.3	81.7	82.2	84.1	84.3	3.2
Kansas	21.7	28.7	36.5	39.3	81.2	21.7	28.7	36.5	39.3	81.2
Kentucky	29.2	29.0	18.7	19.0	-34.8	89.5	94.2	91.8	91.6	2.3
Louisiana	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Maine	4.3	1.3	0.0	0.0	-100.0	4.3	1.3	0.0	0.0	-100.0
Maryland	70.9	76.8	76.2	73.6	3.8	70.9	76.8	76.2	73.6	3.8
Massachusetts	21.2	21.4	25.8	30.5	43.6	73.6	70.6	68.9	68.4	-7.1
Michigan	73.1	69.7	66.7	66.6	-8.8	73.1	100.0	100.0	100.0	36.8
Minnesota	64.7	64.0	65.5	67.0	3.5	64.7	64.0	65.5	67.0	3.5
Mississippi	2.8	0.0	0.0	0.0	-100.0	2.8	0.0	0.0	0.0	-100.0
Missouri	41.0	40.7	43.5	45.1	10.0	41.0	40.7	43.5	45.1	10.0
Montana	4.2	2.4	0.0	0.0	-100.0	4.2	2.4	0.0	0.0	-100.0
Nebraska	17.7	18.3	18.7	16.2	-8.4	76.7	77.9	78.6	79.7	3.9
Nevada	47.5	41.7	40.4	48.5	2.1	47.5	41.7	40.4	48.5	2.1
New Hampshire	2.7	3.6	6.9	11.3	321.1	2.7	3.6	6.9	11.8	337.6
New Jersey	58.5	58.1	64.0	68.0	16.2	61.1	61.7	68.4	72.2	18.1
New Mexico	78.0	71.3	68.0	68.2	-12.6	78.0	71.3	68.0	68.2	-12.6
New York	34.5	26.0	27.1	37.1	7.6	34.9	26.3	27.3	37.4	7.2
North Carolina	4.4	4.6	4.4	2.4	-44.9	17.2	4.6	4.4	2.4	-85.9
North Dakota	2.2	1.6	1.1	1.6	-26.1	2.2	1.6	1.1	1.6	-26.1
Ohio	30.4	25.0	25.2	29.1	-4.2	30.4	25.0	25.2	29.1	-4.2
Oklahoma	34.7	37.4	43.4	43.9	26.4	66.0	72.9	74.6	75.0	13.6
Oregon	80.3	72.6	67.8	66.2	-17.5	92.7	89.5	89.4	88.5	-4.6
Pennsylvania	58.1	61.7	63.1	69.5	19.7	61.0	62.0	63.1	69.6	14.0
Rhode Island	65.1	71.9	73.7	73.7	13.3	65.1	71.9	73.7	73.7	13.3
South Carolina	1.5	3.7	5.2	7.2	380.0	3.5	5.8	7.3	9.6	172.3
South Dakota	0.0	0.0	0.0	0.0	0.0	82.3	100.0	100.0	100.0	21.5
Tennessee	99.6	100.0	100.0	93.4	-6.3	99.6	100.0	100.0	99.6	-0.1
Texas	21.4	26.1	27.3	29.4	37.8	24.3	29.8	31.2	33.5	38.0
Utah	50.4	60.5	58.1	55.1	9.4	89.9	90.0	90.2	89.2	-0.8
Vermont	58.8	22.3	0.0	0.0	-100.0	58.8	22.3	0.0	0.0	-100.0
Virginia	30.4	33.2	45.0	50.6	66.6	30.4	33.2	45.0	50.6	66.6
Washington	65.2	60.8	57.3	54.9	-15.8	65.2	60.8	57.3	99.9	53.1
West Virginia	21.8	19.5	20.4	20.4	-6.5	21.8	19.5	20.4	20.4	-6.5
Wisconsin	51.6	53.7	54.0	51.8	0.4	52.8	55.2	55.9	53.9	2.2
Wyoming	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

SOURCE: Medicaid Analytic Extract 1999-2002.

HMO/HIO = health maintenance organization or health insuring organization; PHP = prepaid health plan.

TABLE A3.13
MANAGED CARE ENROLLMENT IN 2002, BY BASIS OF ELIGIBILITY

	Number of Enrollees in HMO/HIO or PHP	Percentage of Enrollees in HMO/HIO or PHP				
			Basis of Eligibility			
	Total	Total	Child	Adult	Aged	Disabled
United States	**26,935,984**	**50.6**	**60.0**	**46.1**	**28.5**	**41.7**
Alabama	535,704	62.4	86.4	34.4	9.9	57.9
Alaska	0	0.0	0.0	0.0	0.0	0.0
Arizona	979,210	85.9	89.7	81.7	74.9	89.4
Arkansas	0	0.0	0.0	0.0	0.0	0.0
California	6,235,100	65.4	87.0	33.1	94.9	99.3
Colorado	414,008	92.6	99.1	80.9	86.0	89.1
Connecticut	350,392	70.5	95.1	90.8	0.0	1.5
Delaware	134,923	89.8	97.5	90.8	49.3	83.5
District of Columbia	103,926	68.1	89.4	87.7	0.1	12.4
Florida	1,066,918	38.9	52.1	33.1	8.3	25.2
Georgia	0	0.0	0.0	0.0	0.0	0.0
Hawaii	160,540	77.7	97.3	94.4	1.1	17.3
Idaho	0	0.0	0.0	0.0	0.0	0.0
Illinois	207,067	9.8	14.8	10.1	0.1	0.3
Indiana	317,049	34.5	44.1	40.8	0.0	6.9
Iowa	306,291	84.3	98.5	92.2	1.5	85.3
Kansas	122,359	39.3	46.3	48.0	32.7	12.3
Kentucky	722,318	91.6	96.8	93.7	63.8	90.5
Louisiana	0	0.0	0.0	0.0	0.0	0.0
Maine	0	0.0	0.0	0.0	0.0	0.0
Maryland	581,057	73.6	96.2	52.0	0.9	58.5
Massachusetts	827,445	68.4	85.3	80.9	1.5	48.5
Michigan	1,548,615	100.0	100.0	100.0	100.0	100.0
Minnesota	465,513	67.0	83.0	78.7	48.3	6.9
Mississippi	0	0.0	0.0	0.0	0.0	0.0
Missouri	509,446	45.1	60.9	53.0	0.0	1.2
Montana	0	0.0	0.0	0.0	0.0	0.0
Nebraska	213,778	79.7	95.3	86.1	4.4	43.8
Nevada	106,333	48.5	64.5	62.4	0.0	1.5
New Hampshire	14,418	11.8	17.6	6.3	0.0	0.5
New Jersey	735,655	72.2	89.5	86.6	33.8	32.8
New Mexico	317,515	68.2	81.1	54.0	4.5	51.6
New York	1,692,025	37.4	54.4	36.5	4.2	12.3
North Carolina	34,485	2.4	3.3	3.1	0.0	0.8
North Dakota	1,178	1.6	2.1	2.4	0.0	0.0
Ohio	535,054	29.1	38.7	36.3	0.0	2.9
Oklahoma	538,835	75.0	88.6	81.8	1.2	50.5
Oregon	573,499	88.5	92.9	87.0	78.3	84.2
Pennsylvania	1,205,119	69.6	75.9	74.5	36.7	70.5
Rhode Island	152,330	73.7	97.3	98.6	0.7	21.3
South Carolina	89,802	9.6	14.8	5.0	0.5	4.4
South Dakota	117,356	100.0	100.0	100.0	100.0	100.0
Tennessee	1,652,833	99.6	100.0	100.0	95.4	99.6
Texas	1,124,878	33.5	41.2	30.7	10.6	21.2
Utah	223,687	89.2	96.9	71.7	85.5	93.5
Vermont	0	0.0	0.0	0.0	0.0	0.0
Virginia	374,499	50.6	65.2	62.5	4.5	32.9
Washington	1,129,519	99.9	100.0	99.5	100.0	100.0
West Virginia	77,026	20.4	30.5	29.6	0.0	1.0
Wisconsin	438,279	53.9	75.8	73.3	2.7	11.5
Wyoming	0	0.0	0.0	0.0	0.0	0.0

SOURCE: Medicaid Analytic Extract 2002.

HMO/HIO = health maintenance organization or health insuring organization; PHP = prepaid health plan.

TABLE A3.14

PERCENTAGE EVER ENROLLED IN MANAGED CARE (MC) IN 2002, BY TYPE OF PLAN

	HMO/HIO	Dental	BHO	Prenatal	LTC	PACE	PCCM	Other MC
United States	**38.3**	**12.8**	**15.1**	**0.1**	**0.1**	**0.0**	**14.4**	**6.1**
Alabama	0.5	0.0	0.0	4.1	0.0	0.0	52.8	58.1
Alaska	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Arizona	82.3	0.0	6.2	0.0	3.9	0.0	0.0	0.0
Arkansas	0.0	0.0	0.0	0.0	0.0	0.0	54.0	0.0
California	41.1	63.2	0.0	0.0	0.0	0.0	0.0	0.4
Colorado	52.6	0.0	92.5	0.0	0.0	0.0	17.7	0.0
Connecticut	70.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Delaware	79.7	0.0	0.0	0.0	0.0	0.0	3.1	76.8
District of Columbia	68.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Florida	35.2	0.0	3.9	0.0	0.0	0.0	31.8	0.0
Georgia	0.0	0.0	0.0	0.0	0.0	0.0	63.8	0.0
Hawaii	77.5	0.0	2.3	0.0	0.0	0.0	0.0	0.0
Idaho	0.0	0.0	0.0	0.0	0.0	0.0	47.1	0.0
Illinois	8.6	0.0	0.0	0.0	0.0	0.0	0.0	1.3
Indiana	34.5	0.0	0.0	0.0	0.0	0.0	47.4	0.0
Iowa	26.1	0.0	84.3	0.0	0.0	0.0	29.7	0.0
Kansas	39.3	0.0	0.0	0.0	0.0	0.0	45.2	0.0
Kentucky	19.0	0.0	0.0	0.0	0.0	0.0	54.2	89.6
Louisiana	0.0	0.0	0.0	0.0	0.0	0.0	36.0	0.0
Maine	0.0	0.0	0.0	0.0	0.0	0.0	39.3	0.0
Maryland	73.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Massachusetts	30.5	0.0	45.5	0.0	0.0	0.1	43.6	0.0
Michigan	66.6	7.5	100.0	0.0	0.0	0.0	0.0	0.0
Minnesota	67.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Mississippi	0.0	0.0	0.0	0.0	0.0	0.0	46.1	0.0
Missouri	45.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Montana	0.0	0.0	0.0	0.0	0.0	0.0	70.5	0.0
Nebraska	16.2	0.0	79.7	0.0	0.0	0.0	19.1	0.0
Nevada	48.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0
New Hampshire	11.3	0.5	0.0	0.0	0.0	0.0	0.0	0.0
New Jersey	68.0	0.0	0.0	0.0	0.0	0.0	0.0	4.2
New Mexico	68.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0
New York	37.1	0.0	0.2	0.0	0.0	0.0	0.6	0.0
North Carolina	2.4	0.0	0.0	0.0	0.0	0.0	68.4	0.0
North Dakota	1.6	0.0	0.0	0.0	0.0	0.0	64.2	0.0
Ohio	29.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Oklahoma	43.9	0.0	0.0	0.0	0.0	0.0	0.6	34.5
Oregon	66.2	84.5	83.2	0.0	0.0	0.1	3.1	0.0
Pennsylvania	69.5	0.0	59.8	0.0	0.0	0.0	12.4	0.0
Rhode Island	73.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0
South Carolina	7.2	0.0	0.0	0.0	0.0	0.0	0.0	2.5
South Dakota	0.0	100.0	0.0	0.0	0.0	0.0	75.3	0.0
Tennessee	93.4	0.0	93.4	0.0	0.0	0.0	0.0	92.2
Texas	29.4	0.0	10.0	0.0	0.0	0.0	13.2	0.0
Utah	55.1	0.0	89.0	0.0	0.0	0.0	17.3	0.0
Vermont	0.0	0.0	0.0	0.0	0.0	0.0	67.6	0.0
Virginia	50.6	0.0	0.0	0.0	0.0	0.0	14.6	0.0
Washington	54.9	0.0	99.9	0.0	0.0	0.0	0.6	0.0
West Virginia	20.4	0.0	0.0	0.0	0.0	0.0	33.3	0.0
Wisconsin	51.8	0.0	0.1	0.0	1.0	0.3	0.0	0.8
Wyoming	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

SOURCE: Medicaid Analytic Extract 2002.

BHO = behavioral health organization; HMO/HIO = health maintenance organization or health insuring organization;
LTC = institutional long-term care; PACE = Program of All-Inclusive Care for the Elderly; PCCM = primary care case management.

TABLE A3.15
MEDICAID EXPENDITURES AMONG FULL-BENEFIT ENROLLEES IN 2002

	Overall		Managed Care (MC)				Fee-for-Service (FFS)			
	Total Medicaid $ (in 1,000s)	$ per Enrollee	Capitated $ as % of Total Medicaid $	Capitated $ per Enrollee in MC	Capitated $ per Enrollee in HMO/HIO (per Year)	Capitated $ per Enrollee in HMO/HIO (per Month)	FFS $ as % of Total $	FFS $ per FFS Enrollee	FFS $ per FFS User	FFS $ per Enrollee in HMO/HIO
United States	**208,060,113**	**3,907**	**16.0**	**1,024**	**1,473**	**166**	**84.0**	**5,570**	**6,777**	**911**
Alabama	2,745,227	3,195	11.3	532	8	-	88.7	3,517	4,012	4,574
Alaska	745,096	5,986	0.0	-	-	-	100.0	5,993	7,011	-
Arizona	2,960,247	2,598	85.0	2,571	1,625	277	15.0	2,352	4,752	38
Arkansas	2,050,669	3,181	0.9	52	-	-	99.1	3,726	4,081	-
California	22,087,785	2,315	21.7	770	1,162	112	78.3	5,893	7,439	682
Colorado	2,056,816	4,598	22.2	1,103	1,608	186	77.8	6,800	8,282	1,215
Connecticut	3,283,491	6,607	16.8	1,571	1,571	165	83.2	19,778	22,657	285
Delaware	656,232	4,369	30.3	1,472	1,658	186	69.7	18,216	23,818	1,298
District of Columbia	947,396	6,210	21.7	1,980	1,980	203	78.3	14,671	18,967	657
Florida	9,337,214	3,401	12.5	643	1,160	153	87.5	4,685	5,835	676
Georgia	4,689,722	2,962	0.6	28	-	-	99.4	3,092	3,739	-
Hawaii	686,438	3,322	34.2	1,460	1,465	158	65.8	9,201	10,800	224
Idaho	816,062	4,087	0.3	28	-	-	99.7	4,130	4,859	-
Illinois	8,009,491	3,805	2.6	998	979	124	97.4	4,033	5,221	652
Indiana	3,763,181	4,096	8.6	503	997	128	91.4	5,674	6,751	713
Iowa	1,851,139	5,096	9.8	594	1,142	135	90.2	6,200	7,092	707
Kansas	1,566,818	5,037	8.3	528	1,047	156	91.7	6,008	7,156	2,864
Kentucky	3,470,867	4,399	11.7	550	2,383	252	88.3	4,853	5,317	1,054
Louisiana	3,331,326	3,185	0.2	20	-	-	99.8	3,323	3,932	-
Maine	1,796,257	4,997	0.2	21	-	-	99.8	4,998	6,701	-
Maryland	3,727,611	4,723	28.6	1,838	1,838	195	71.4	11,787	19,532	1,611
Massachusetts	6,338,893	5,237	10.3	783	1,030	121	89.7	6,516	8,077	908
Michigan	4,691,624	3,030	37.9	1,148	1,580	157	62.1	5,022	6,393	519
Minnesota	4,484,305	6,455	23.4	2,255	2,255	266	76.6	11,282	14,969	2,088
Mississippi	2,447,242	3,414	0.1	8	-	-	99.9	3,433	3,930	-
Missouri	4,139,286	3,667	15.2	1,232	1,232	126	84.8	5,548	6,415	396
Montana	509,091	4,683	0.3	22	-	-	99.7	4,713	5,317	-
Nebraska	1,204,740	4,490	4.6	260	1,262	143	95.4	4,897	5,468	1,333
Nevada	732,950	3,342	14.6	1,007	1,007	150	85.4	5,846	7,678	394
New Hampshire	760,753	6,206	2.6	1,358	1,411	180	97.4	6,825	8,032	1,118
New Jersey	5,697,510	5,589	19.5	1,507	1,590	176	80.5	13,940	17,058	777
New Mexico	1,698,081	3,649	46.5	2,486	2,486	271	53.5	6,126	7,900	724
New York	31,098,158	6,869	8.4	1,526	1,449	173	91.6	9,218	12,391	1,418

TABLE A3.15
MEDICAID EXPENDITURES AMONG FULL-BENEFIT ENROLLEES IN 2002

	Overall		Managed Care (MC)				Fee-for-Service (FFS)			
	Total Medicaid $ (in 1,000s)	$ per Enrollee	Capitated $ as % of Total Medicaid $	Capitated $ per Enrollee in MC	Capitated $ per Enrollee in HMO/HIO (per Year)	Capitated $ per Enrollee in HMO/HIO (per Month)	FFS $ as % of Total $	FFS $ per FFS Enrollee	FFS $ per FFS User	FFS $ per Enrollee in HMO/HIO
North Carolina	6,194,113	4,346	0.9	59	881	128	99.1	4,527	5,036	1,351
North Dakota	426,503	5,793	0.4	31	770	124	99.6	5,988	7,076	593
Ohio	9,503,678	5,177	6.6	1,167	1,167	140	93.4	6,775	7,762	515
Oklahoma	2,096,127	2,919	17.5	681	1,084	157	82.5	4,148	5,229	339
Oregon	2,217,352	3,421	40.3	1,558	1,921	202	59.7	4,583	5,774	1,229
Pennsylvania	8,712,059	5,030	43.8	2,776	3,166	242	56.2	8,444	10,242	627
Rhode Island	1,243,103	6,018	14.8	1,206	1,206	124	85.2	17,167	19,112	1,264
South Carolina	2,724,508	2,920	2.2	677	668	80	97.8	3,378	3,813	922
South Dakota	501,905	4,277	1.7	71	-	-	98.3	4,380	5,079	-
Tennessee	5,294,602	3,189	32.7	1,046	1,111	158	67.3	708	1,315	2,253
Texas	11,663,247	3,473	10.8	855	1,237	180	89.2	4,333	5,036	956
Utah	884,626	3,529	21.8	864	1,223	136	78.2	3,663	4,855	2,193
Vermont	613,505	3,872	0.8	44	-	-	99.2	3,843	4,416	-
Virginia	3,034,810	4,102	21.0	1,361	1,695	220	79.0	6,733	8,160	583
Washington	2,767,938	2,448	24.1	591	1,065	128	75.9	4,527	5,490	423
West Virginia	1,555,628	4,123	3.6	287	694	93	96.4	4,956	5,608	827
Wisconsin	3,954,608	4,867	26.3	2,372	1,368	179	73.7	7,240	8,904	309
Wyoming	290,085	4,148	0.0	-	-	-	100.0	4,338	5,108	-

SOURCE: Medicaid Analytic Extract 2002.

- = not applicable; FFS enrollees = full-benefit Medicaid enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; FFS users = FFS enrollees using services in 2002; HMO/HIO = health maintenance organization or health insuring organization; PHP = prepaid health plan.

TABLE A3.16
MEDICAID EXPENDITURE TRENDS IN 2002 DOLLARS, 1999-2002

	Expenditures per Full-Benefit Enrollee					Capitated Payments per Enrollee in HMO/HIO					FFS Expenditures per FFS Enrollee				
	1999	2000	2001	2002	% Change 1999-2002	1999	2000	2001	2002	% Change 1999-2002	1999	2000	2001	2002	% Change 1999-2002
United States	**4,105**	**4,089**	**4,005**	**3,907**	**-4.8**	**1,410**	**1,493**	**1,475**	**1,473**	**4.5**	**5,173**	**5,034**	**5,626**	**5,570**	**7.7**
Alabama	2,781	3,026	3,311	3,195	14.9	0	2	9	8	>1,000.0	2,941	2,879	3,518	3,517	19.6
Alaska	4,554	4,829	5,304	5,986	31.4	-	-	-	-	-	4,554	4,829	5,311	5,993	31.6
Arizona	3,344	3,316	2,987	2,598	-22.3	1,944	1,918	1,754	1,625	-16.4	2,675	2,746	2,632	2,352	-12.1
Arkansas	3,219	3,360	3,348	3,181	-1.2	-	-	-	-	-	3,215	3,355	3,495	3,726	15.9
California	2,415	2,315	2,341	2,315	-4.1	1,110	1,084	1,201	1,162	4.7	2,951	2,723	5,638	5,893	99.7
Colorado	5,254	5,042	4,704	4,598	-12.5	1,756	1,813	1,734	1,608	-8.4	5,983	6,003	6,661	6,800	13.6
Connecticut	7,293	7,283	6,871	6,607	-9.4	1,589	1,574	1,501	1,571	-1.1	19,464	19,385	19,678	19,778	1.6
Delaware	4,598	4,709	4,627	4,369	-5.0	1,764	1,861	1,812	1,658	-6.0	11,826	10,564	17,531	18,216	54.0
District of Columbia	5,655	5,590	5,625	6,210	9.8	1,611	1,503	1,556	1,980	22.9	11,846	12,573	12,834	14,671	23.8
Florida	3,482	3,512	3,391	3,401	-2.3	1,044	1,166	1,195	1,160	11.1	4,409	4,207	4,501	4,685	6.3
Georgia	2,942	3,084	2,957	2,962	0.7	1,156	-	-	-	-	2,949	3,067	3,082	3,092	4.9
Hawaii	3,162	2,994	3,076	3,322	5.1	1,678	1,525	1,396	1,465	-12.7	8,165	7,946	8,729	9,201	12.7
Idaho	4,412	4,359	4,120	4,087	-7.4	-	-	-	-	-	4,400	4,348	4,164	4,130	-6.1
Illinois	4,189	4,363	4,241	3,805	-9.2	931	987	1,046	979	5.1	4,582	4,695	4,569	4,033	-12.0
Indiana	4,515	4,322	4,274	4,096	-9.3	1,110	941	1,007	997	-10.2	5,163	5,070	5,209	5,674	9.9
Iowa	4,942	5,107	5,206	5,096	3.1	1,022	1,056	1,140	1,142	11.7	5,980	6,175	6,579	6,200	3.7
Kansas	4,970	5,068	4,989	5,037	1.3	468	604	686	1,047	123.6	5,220	5,499	5,824	6,008	15.1
Kentucky	4,341	4,446	4,469	4,399	1.3	2,485	2,101	2,175	2,383	-4.1	4,657	4,749	4,868	4,853	4.2
Louisiana	3,642	3,473	3,425	3,185	-12.6	-	-	-	-	-	3,642	3,471	3,562	3,323	-8.8
Maine	6,946	6,906	4,886	4,997	-28.1	706	211	24	-	-	7,147	6,961	4,887	4,998	-30.1
Maryland	4,425	4,731	4,777	4,723	6.7	1,677	1,323	1,298	1,838	9.6	6,898	9,332	14,275	11,787	70.9
Massachusetts	5,453	5,369	5,405	5,237	-4.0	1,523	1,389	1,178	1,030	-32.4	5,942	5,900	6,381	6,516	9.7
Michigan	2,779	2,904	2,966	3,030	9.0	1,360	1,422	1,441	1,580	16.2	5,263	4,978	5,245	5,022	-4.6
Minnesota	5,998	6,096	6,169	6,455	7.6	1,888	2,040	2,026	2,255	19.5	9,798	9,719	10,367	11,282	15.1
Mississippi	3,338	3,352	3,442	3,414	2.3	1,278	-	-	-	-	3,354	3,339	3,445	3,433	2.3
Missouri	3,694	3,618	3,597	3,667	-0.7	933	1,064	1,160	1,232	32.1	5,371	5,084	5,363	5,548	3.3
Montana	4,467	4,885	4,876	4,683	4.8	1,176	934	-	-	-	4,400	4,923	4,901	4,713	7.1
Nebraska	4,274	4,335	4,443	4,490	5.1	1,610	1,652	1,632	1,262	-21.6	4,383	4,447	4,609	4,897	11.7
Nevada	3,587	3,584	3,807	3,342	-6.8	1,019	1,091	1,277	1,007	-1.1	5,379	5,014	5,528	5,846	8.7
New Hampshire	6,551	6,657	6,555	6,206	-5.3	1,657	1,495	1,559	1,411	-14.8	6,645	6,798	6,911	6,825	2.7
New Jersey	5,935	5,777	5,527	5,589	-5.8	1,372	1,397	1,381	1,590	15.9	11,702	11,093	12,622	13,940	19.1
New Mexico	3,175	3,137	3,506	3,649	14.9	2,030	2,001	2,300	2,486	22.5	5,241	4,420	5,982	6,126	16.9
New York	8,451	8,259	7,760	6,869	-18.7	1,188	1,686	1,292	1,449	22.0	11,009	10,006	9,522	9,218	-16.3
North Carolina	4,171	4,337	4,241	4,346	4.2	1,063	1,078	969	881	-17.1	4,218	4,414	4,441	4,527	7.3
North Dakota	6,339	6,292	6,105	5,793	-8.6	964	881	748	770	-20.1	6,433	6,361	6,204	5,988	-6.9
Ohio	5,361	5,429	5,023	5,177	-3.4	921	1,120	1,097	1,167	26.7	7,057	6,701	6,244	6,775	-4.0
Oklahoma	2,955	2,919	3,255	2,919	0.5	817	1,065	1,098	1,084	32.6	3,789	3,782	4,674	4,148	9.5

TABLE A3.16
MEDICAID EXPENDITURE TRENDS IN 2002 DOLLARS, 1999-2002

	Expenditures per Full-Benefit Enrollee					Capitated Payments per Enrollee in HMO/HIO					FFS Expenditures per FFS Enrollee				
	1999	2000	2001	2002	% Change 1999-2002	1999	2000	2001	2002	% Change 1999-2002	1999	2000	2001	2002	% Change 1999-2002
Oregon	3,495	3,420	3,403	3,421	-2.1	1,918	1,933	1,841	1,921	0.2	4,375	3,571	4,286	4,583	4.8
Pennsylvania	4,092	4,610	4,908	5,030	22.9	2,475	2,909	2,957	3,166	28.0	5,081	6,263	7,492	8,444	66.2
Rhode Island	13,127	5,962	5,983	6,018	-54.2	1,185	1,110	1,112	1,206	1.7	34,306	16,178	17,182	17,167	-50.0
South Carolina	3,141	3,190	2,942	2,920	-7.0	699	554	532	668	-4.5	3,146	3,234	3,328	3,378	7.4
South Dakota	4,489	4,372	4,239	4,277	-4.7	-	-	-	-	-	4,449	4,298	4,321	4,380	-1.5
Tennessee	2,419	2,861	2,816	3,189	31.9	1,745	1,899	1,832	1,111	-36.3	142	-	-	708	399.4
Texas	3,743	3,761	3,568	3,473	-7.2	1,373	1,178	1,158	1,237	-9.9	4,001	4,259	4,429	4,333	8.3
Utah	3,311	3,886	3,850	3,529	6.6	354	1,169	1,433	1,223	245.1	3,999	4,473	4,179	3,663	-8.4
Vermont	3,566	3,650	3,813	3,872	8.6	991	343	-	-	-	5,628	4,051	3,783	3,813	-31.7
Virginia	3,717	3,962	4,078	4,102	10.4	1,507	1,566	1,350	1,695	12.5	4,426	4,893	6,209	6,733	52.1
Washington	2,777	2,773	2,784	2,448	-11.9	1,117	1,226	1,041	1,065	-4.7	5,156	4,528	4,806	4,527	-12.2
West Virginia	3,752	4,001	4,157	4,123	9.9	1	121	700	694	>1,000.0	4,572	4,707	5,013	4,956	8.4
Wisconsin	5,357	5,387	5,365	4,867	-9.1	1,054	1,405	1,377	1,368	29.8	9,275	9,108	9,025	7,240	-21.9
Wyoming	4,404	4,524	4,395	4,148	-5.8	-	-	-	-	-	4,404	4,524	4,589	4,338	-1.5

SOURCE: Medicaid Analytic Extract 1999-2002.

NOTES: The following Current Price Index was used to adjust expenditures for 2002 dollars: U.S. City Average, All Urban Consumer, Medical Care Series Total (CUUR0000SAM).
Some restricted-benefit enrollees may be included in the 1999 and 2000 estimates in Table A3.16. Because restricted-benefit enrollees have lower average expenditures than full-benefit enrollees, the presented estimates may underestimate 1999 and 2000 costs.

- = not applicable; FFS enrollees = full-benefit Medicaid enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002;
HMO/HIO = health maintenance organization or health insuring organization.

TABLE A3.17
MEDICAID EXPENDITURE TRENDS IN UNADJUSTED DOLLARS, 1999-2002

	Expenditures per Full-Benefit Enrollee					Capitated Payments per Enrollee in HMO/HIO					FFS Expenditures per FFS Enrollee				
	1999	2000	2001	2002	% Change 1999-2002	1999	2000	2001	2002	% Change 1999-2002	1999	2000	2001	2002	% Change 1999-2002
United States	**3,602**	**3,734**	**3,826**	**3,907**	**8.5**	**1,237**	**1,364**	**1,409**	**1,473**	**19.1**	**4,539**	**4,597**	**5,374**	**5,570**	**22.7**
Alabama	2,440	2,763	3,163	3,195	31.0	0	2	8	8	>1,000.0	2,581	2,629	3,361	3,517	36.3
Alaska	3,996	4,410	5,067	5,986	49.8	-	-	-	-	-	3,996	4,410	5,073	5,993	50.0
Arizona	2,935	3,028	2,853	2,598	-11.5	1,706	1,751	1,676	1,625	-4.7	2,347	2,508	2,514	2,352	0.2
Arkansas	2,825	3,068	3,198	3,181	12.6	-	-	-	-	-	2,821	3,063	3,338	3,726	32.1
California	2,119	2,114	2,236	2,315	9.3	974	990	1,148	1,162	19.4	2,589	2,487	5,386	5,893	127.6
Colorado	4,610	4,604	4,493	4,598	-0.3	1,541	1,655	1,657	1,608	4.3	5,250	5,482	6,363	6,800	29.5
Connecticut	6,400	6,651	6,563	6,607	3.2	1,394	1,437	1,434	1,571	12.7	17,079	17,702	18,796	19,778	15.8
Delaware	4,034	4,300	4,420	4,369	8.3	1,548	1,700	1,730	1,658	7.1	10,377	9,647	16,745	18,216	75.5
District of Columbia	4,962	5,105	5,373	6,210	25.2	1,413	1,372	1,486	1,980	40.1	10,394	11,481	12,259	14,671	41.1
Florida	3,055	3,207	3,239	3,401	11.3	916	1,065	1,141	1,160	26.7	3,869	3,842	4,299	4,685	21.1
Georgia	2,581	2,816	2,824	2,962	14.8	1,014	-	-	-	-	2,587	2,800	2,944	3,092	19.5
Hawaii	2,775	2,734	2,938	3,322	19.7	1,472	1,392	1,333	1,465	-0.5	7,164	7,256	8,338	9,201	28.4
Idaho	3,872	3,980	3,936	4,087	5.6	-	-	-	-	-	3,861	3,970	3,977	4,130	7.0
Illinois	3,676	3,984	4,050	3,805	3.5	817	902	999	979	19.8	4,020	4,288	4,364	4,033	0.3
Indiana	3,962	3,947	4,083	4,096	3.4	974	859	962	997	2.3	4,530	4,629	4,976	5,674	25.3
Iowa	4,336	4,663	4,972	5,096	17.5	897	965	1,089	1,142	27.3	5,247	5,638	6,284	6,200	18.2
Kansas	4,361	4,628	4,766	5,037	15.5	411	551	655	1,047	154.9	4,580	5,021	5,563	6,008	31.2
Kentucky	3,809	4,060	4,268	4,399	15.5	2,181	1,918	2,077	2,383	9.3	4,086	4,337	4,649	4,853	18.8
Louisiana	3,196	3,171	3,271	3,185	-0.4	-	-	-	-	-	3,196	3,169	3,402	3,323	4.0
Maine	6,095	6,306	4,667	4,997	-18.0	619	193	23	-	-	6,271	6,357	4,668	4,998	-20.3
Maryland	3,882	4,320	4,563	4,723	21.6	1,471	1,208	1,240	1,838	24.9	6,053	8,522	13,635	11,787	94.7
Massachusetts	4,785	4,902	5,163	5,237	9.4	1,337	1,268	1,125	1,030	-22.9	5,214	5,387	6,095	6,516	25.0
Michigan	2,439	2,651	2,833	3,030	24.2	1,193	1,299	1,376	1,580	32.4	4,618	4,546	5,010	5,022	8.7
Minnesota	5,263	5,567	5,893	6,455	22.7	1,656	1,863	1,935	2,255	36.2	8,597	8,875	9,903	11,282	31.2
Mississippi	2,929	3,061	3,288	3,414	16.6	1,121	-	-	-	-	2,943	3,049	3,291	3,433	16.6
Missouri	3,241	3,304	3,436	3,667	13.1	818	972	1,108	1,232	50.6	4,713	4,642	5,123	5,548	17.7
Montana	3,920	4,461	4,657	4,683	19.5	1,032	853	-	-	-	3,861	4,496	4,682	4,713	22.1
Nebraska	3,750	3,958	4,243	4,490	19.7	1,413	1,508	1,559	1,262	-10.7	3,846	4,061	4,403	4,897	27.3
Nevada	3,148	3,273	3,637	3,342	6.2	894	996	1,220	1,007	12.7	4,720	4,579	5,281	5,846	23.9
New Hampshire	5,749	6,079	6,261	6,206	8.0	1,454	1,365	1,490	1,411	-3.0	5,831	6,207	6,601	6,825	17.1
New Jersey	5,208	5,275	5,279	5,589	7.3	1,204	1,275	1,319	1,590	32.1	10,268	10,129	12,057	13,940	35.8
New Mexico	2,786	2,865	3,349	3,649	31.0	1,781	1,827	2,197	2,486	39.6	4,599	4,036	5,714	6,126	33.2
New York	7,416	7,541	7,412	6,869	-7.4	1,042	1,539	1,234	1,449	39.0	9,660	9,138	9,095	9,218	-4.6
North Carolina	3,660	3,961	4,051	4,346	18.7	932	984	926	881	-5.5	3,701	4,031	4,242	4,527	22.3
North Dakota	5,562	5,745	5,831	5,793	4.1	846	805	714	770	-9.0	5,645	5,809	5,926	5,988	6.1
Ohio	4,704	4,957	4,798	5,177	10.1	809	1,023	1,048	1,167	44.4	6,192	6,119	5,964	6,775	9.4
Oklahoma	2,593	2,665	3,109	2,919	12.5	717	972	1,049	1,084	51.2	3,324	3,453	4,464	4,148	24.8

TABLE A3.17
MEDICAID EXPENDITURE TRENDS IN UNADJUSTED DOLLARS, 1999-2002

	Expenditures per Full-Benefit Enrollee					Capitated Payments per Enrollee in HMO/HIO					FFS Expenditures per FFS Enrollee				
	1999	2000	2001	2002	% Change 1999-2002	1999	2000	2001	2002	% Change 1999-2002	1999	2000	2001	2002	% Change 1999-2002
Oregon	3,066	3,123	3,250	3,421	11.6	1,683	1,765	1,759	1,921	14.1	3,838	3,261	4,094	4,583	19.4
Pennsylvania	3,591	4,210	4,688	5,030	40.1	2,171	2,656	2,824	3,166	45.8	4,459	5,719	7,157	8,444	89.4
Rhode Island	11,518	5,445	5,715	6,018	-47.8	1,040	1,014	1,062	1,206	15.9	30,102	14,773	16,412	17,167	-43.0
South Carolina	2,756	2,913	2,810	2,920	6.0	614	506	508	668	8.8	2,760	2,953	3,178	3,378	22.4
South Dakota	3,939	3,993	4,049	4,277	8.6	-	-	-	-	-	3,904	3,925	4,127	4,380	12.2
Tennessee	2,122	2,613	2,690	3,189	50.3	1,531	1,734	1,750	1,111	-27.4	124	0	0	708	469.2
Texas	3,285	3,434	3,408	3,473	5.7	1,205	1,076	1,107	1,237	2.7	3,510	3,889	4,230	4,333	23.4
Utah	2,906	3,549	3,677	3,529	21.4	311	1,068	1,369	1,223	293.3	3,509	4,084	3,992	3,663	4.4
Vermont	3,129	3,333	3,642	3,872	23.8	870	313	-	-	-	4,938	3,699	3,614	3,843	-22.2
Virginia	3,261	3,618	3,895	4,102	25.8	1,322	1,430	1,289	1,695	28.2	3,884	4,468	5,931	6,733	73.4
Washington	2,437	2,532	2,660	2,448	0.4	980	1,119	995	1,065	8.6	4,524	4,134	4,591	4,527	0.0
West Virginia	3,292	3,654	3,970	4,123	25.2	1	111	669	694	>1,000.0	4,012	4,298	4,789	4,956	23.5
Wisconsin	4,700	4,920	5,124	4,867	3.6	925	1,283	1,315	1,368	47.9	8,138	8,317	8,620	7,240	-11.0
Wyoming	3,864	4,131	4,198	4,148	7.3	-	-	-	-	-	3,864	4,131	4,384	4,338	12.2

SOURCE: Medicaid Analytic Extract 1999-2002.

NOTE: Some restricted-benefit enrollees may be included in the 1999 and 2000 estimates in Table A3.17. Because restricted-benefit enrollees have lower average expenditures than full-benefit enrollees, the presented estimates may underestimate 1999 and 2000 costs.

- = not applicable; FFS enrollees = full-benefit Medicaid enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002;
HMO/HIO = health maintenance organization or health insuring organization.

TABLE A3.18

MEDICAID FEE-FOR-SERVICE (FFS) UTILIZATION AMONG FFS ENROLLEES, BY BASIS OF ELIGIBILITY

	Total Number of FFS Enrollees					Percentage Using Service				
	Total	Children	Adults	Aged	Disabled	Total	Children	Adults	Aged	Disabled
United States	**28,053,241**	**12,767,201**	**5,192,754**	**3,861,274**	**6,232,012**	**82.2**	**80.0**	**76.2**	**85.4**	**89.7**
Alabama	686,311	414,497	56,662	46,123	169,029	87.7	86.3	83.8	93.8	90.5
Alaska	124,333	79,170	25,946	6,609	12,608	85.5	83.7	84.6	93.3	94.0
Arizona**	173,138	51,847	68,221	21,316	31,754	49.5	76.1	48.0	14.8	32.5
Arkansas	545,474	326,556	66,670	38,994	113,254	91.3	91.6	90.9	93.9	89.9
California**	2,479,686	746,064	385,135	546,758	801,729	79.2	66.3	66.1	88.1	91.5
Colorado**	193,225	88,287	37,983	33,325	33,630	82.1	76.2	78.2	93.6	90.6
Connecticut**	133,134	13,161	9,777	52,816	57,380	87.3	40.3	57.5	96.1	95.0
Delaware**	16,587	3,441	2,305	5,921	4,920	76.5	46.6	40.6	94.9	92.0
District of Columbia**	45,897	8,191	3,066	9,552	25,088	77.3	60.8	42.5	85.7	83.8
Florida*	1,604,035	732,624	294,577	183,527	393,307	80.3	76.4	76.0	84.7	88.6
Georgia	1,507,758	909,484	265,639	86,718	245,917	82.7	80.8	84.0	90.0	85.7
Hawaii**	45,226	2,579	3,808	19,426	19,413	85.2	27.8	36.6	93.7	93.8
Idaho	196,967	128,933	30,508	11,344	26,182	85.0	83.1	82.5	96.0	92.6
Illinois	1,905,369	985,673	345,673	279,286	294,737	77.3	83.1	80.9	38.1	90.5
Indiana*	566,224	299,676	86,991	70,941	108,616	84.0	81.7	77.4	92.1	90.6
Iowa*	258,416	120,309	44,940	33,629	59,538	87.4	83.9	81.6	96.1	94.0
Kansas*	180,861	94,232	24,466	19,247	42,916	84.0	79.8	74.9	95.9	93.0
Kentucky	598,919	294,845	90,260	46,506	167,308	91.3	90.8	89.8	93.3	92.3
Louisiana	1,000,076	644,288	112,371	75,704	167,713	84.5	82.1	85.9	94.6	88.5
Maine	358,780	104,452	68,080	73,817	112,431	74.6	90.3	81.4	75.1	55.6
Maryland**	146,212	16,625	36,394	49,668	43,525	60.3	27.9	25.4	77.5	82.4
Massachusetts*	821,461	280,190	219,410	95,489	226,372	80.7	77.6	67.3	92.0	92.6
Michigan**	473,760	156,875	90,546	93,858	132,481	78.6	63.7	74.2	91.9	89.6
Minnesota**	218,263	59,299	31,815	39,408	87,741	75.4	70.0	66.8	45.4	95.5
Mississippi	712,128	391,273	86,344	74,832	159,679	87.3	83.5	88.2	95.7	92.4
Missouri*	596,548	236,427	114,369	93,721	152,031	86.5	84.7	80.0	91.8	90.9
Montana	107,667	57,616	22,589	9,292	18,170	88.6	87.3	86.1	95.7	92.4
Nebraska	222,822	132,767	41,583	21,940	26,532	89.6	89.1	83.2	96.7	96.0
Nevada**	99,889	41,806	17,885	12,916	27,282	76.1	67.4	65.8	92.6	88.5
New Hampshire	106,318	62,522	16,275	12,285	15,236	85.0	81.7	81.7	95.0	93.7
New Jersey**	290,587	53,074	19,746	89,853	127,914	81.7	58.9	63.1	91.0	87.5
New Mexico**	110,815	54,853	16,636	15,802	23,524	77.5	72.4	68.9	91.6	86.1
New York*	2,830,255	866,979	960,274	387,283	615,719	74.4	62.5	69.5	87.4	90.6
North Carolina	1,344,949	707,495	248,981	156,232	232,241	89.9	88.6	87.2	95.2	93.1
North Dakota	70,861	33,857	18,376	9,087	9,541	84.6	82.9	78.6	93.9	93.3

TABLE A3.18

MEDICAID FEE-FOR-SERVICE (FFS) UTILIZATION AMONG FFS ENROLLEES, BY BASIS OF ELIGIBILITY

	Total Number of FFS Enrollees					Percentage Using Service				
	Total	Children	Adults	Aged	Disabled	Total	Children	Adults	Aged	Disabled
Ohio*	1,269,804	604,194	252,976	136,475	276,159	87.3	84.4	81.7	95.8	94.6
Oklahoma*	390,846	227,457	43,601	60,001	59,787	79.3	75.5	70.4	91.7	88.0
Oregon**	173,711	64,899	55,321	24,811	28,680	79.4	72.1	73.7	94.8	93.4
Pennsylvania**	490,538	201,494	73,348	109,915	105,781	82.4	76.8	72.3	92.2	90.1
Rhode Island**	50,500	2,528	683	17,356	29,933	89.8	59.7	25.2	94.4	91.2
South Carolina	770,368	432,839	133,764	79,702	124,063	88.6	87.2	87.5	93.5	91.3
South Dakota	112,680	71,361	18,668	7,660	14,991	86.2	84.5	84.3	97.2	91.4
Tennessee**	102,563	60,059	26,793	7,066	8,645	53.8	53.7	53.6	64.7	46.4
Texas*	2,184,031	1,252,687	329,181	287,665	314,498	86.0	85.9	84.1	87.5	87.5
Utah**	105,998	52,416	36,818	6,384	10,380	75.5	72.4	73.5	91.3	87.9
Vermont	158,434	69,464	49,806	19,750	19,414	87.0	89.0	79.8	91.2	94.2
Virginia**	323,712	139,910	32,182	71,868	79,752	82.5	73.0	76.6	94.5	90.7
Washington**	405,925	124,497	70,343	72,471	138,614	82.5	73.3	70.7	92.4	91.4
West Virginia	289,654	132,051	43,002	24,227	90,374	88.4	86.7	84.8	93.5	91.1
Wisconsin**	384,648	88,301	49,650	109,010	137,687	81.3	70.8	71.4	84.3	89.3
Wyoming	66,878	43,077	12,317	3,688	7,796	84.9	83.6	83.4	95.1	89.7

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

FFS enrollees = full-benefit Medicaid enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002;
HMO/HIO = health maintenance organization or health insuring organization.

TABLE A3.19

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS ENROLLEES, BY BASIS OF ELIGIBILITY

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	Children	Adults	Aged	Disabled	Children	Adults	Aged	Disabled	Children	Adults	Aged	Disabled
United States	**17,601,819,188**	**11,510,468,308**	**48,127,876,959**	**79,010,150,351**	**1,379**	**2,217**	**12,464**	**12,678**	**1,724**	**2,909**	**14,592**	**14,140**
Alabama	432,758,816	121,789,191	731,716,223	1,127,613,988	1,044	2,149	15,864	6,671	1,209	2,564	16,908	7,370
Alaska	257,049,075	113,731,303	108,692,983	265,622,183	3,247	4,383	16,446	21,068	3,878	5,180	17,628	22,408
Arizona**	89,160,740	148,209,505	32,623,038	137,258,666	1,720	2,172	1,530	4,323	2,260	4,522	10,347	13,308
Arkansas	438,285,380	114,615,624	536,809,644	942,879,399	1,342	1,719	13,766	8,325	1,466	1,891	14,656	9,257
California**	836,711,455	711,477,218	4,263,787,452	8,800,325,641	1,122	1,847	7,798	10,977	1,692	2,796	8,852	11,993
Colorado**	151,247,743	80,896,982	509,207,700	572,486,248	1,713	2,130	15,280	17,023	2,249	2,722	16,320	18,785
Connecticut**	44,811,112	18,223,505	1,288,263,552	1,281,773,775	3,405	1,864	24,392	22,338	8,444	3,244	25,372	23,513
Delaware**	5,841,105	1,647,053	155,383,155	139,287,703	1,698	715	26,243	28,311	3,639	1,760	27,663	30,761
District of Columbia**	63,270,360	10,070,709	184,161,865	415,834,834	7,724	3,285	19,280	16,575	12,710	7,735	22,489	19,772
Florida*	841,289,658	577,703,897	1,361,187,462	4,735,105,876	1,148	1,961	7,417	12,039	1,502	2,580	8,754	13,585
Georgia	1,087,095,340	665,356,801	971,481,543	1,937,798,664	1,195	2,505	11,203	7,880	1,480	2,980	12,446	9,193
Hawaii**	795,361	2,727,554	206,839,562	205,759,897	308	716	10,648	10,599	1,109	1,958	11,359	11,299
Idaho	144,545,168	79,155,475	189,716,365	400,022,191	1,121	2,595	16,724	15,279	1,350	3,143	17,421	16,499
Illinois	1,326,898,964	778,876,447	1,389,509,644	4,189,557,181	1,346	2,253	4,975	14,215	1,620	2,784	13,049	15,709
Indiana*	400,633,273	175,052,029	1,061,600,673	1,575,587,803	1,337	2,012	14,965	14,506	1,636	2,601	16,250	16,010
Iowa*	165,651,697	94,158,467	523,257,513	819,147,140	1,377	2,095	15,560	13,758	1,641	2,568	16,188	14,640
Kansas*	135,797,293	43,162,167	297,003,813	610,731,787	1,441	1,764	15,431	14,231	1,806	2,357	16,096	15,305
Kentucky	477,228,653	265,894,182	692,180,882	1,471,151,325	1,619	2,946	14,884	8,793	1,782	3,282	15,956	9,523
Louisiana	630,931,651	287,122,074	829,161,142	1,576,477,322	979	2,555	10,953	9,400	1,193	2,974	11,584	10,621
Maine	393,476,829	209,907,072	332,411,029	857,452,004	3,767	3,083	4,503	7,626	4,173	3,787	5,998	13,727
Maryland**	63,753,062	55,490,316	831,860,771	772,302,358	3,835	1,525	16,748	17,744	13,740	5,998	21,619	21,532
Massachusetts*	415,330,895	363,844,324	1,678,473,439	2,895,347,900	1,482	1,658	17,578	12,790	1,910	2,463	19,098	13,814
Michigan**	141,807,397	156,120,797	1,242,645,775	838,656,253	904	1,724	13,240	6,330	1,419	2,322	14,403	7,062
Minnesota**	138,918,477	55,353,645	288,779,175	1,979,404,162	2,343	1,740	7,328	22,560	3,344	2,604	16,146	23,614
Mississippi	441,921,437	233,978,413	640,853,253	1,127,729,968	1,129	2,710	8,564	7,062	1,353	3,073	8,952	7,640
Missouri*	331,143,769	194,441,548	1,132,501,991	1,651,798,529	1,401	1,700	12,084	10,865	1,653	2,126	13,169	11,952
Montana	114,134,913	60,440,687	137,936,974	194,876,582	1,981	2,676	14,845	10,725	2,269	3,108	15,518	11,609
Nebraska	224,752,668	93,516,285	349,718,978	423,274,808	1,693	2,249	15,940	15,953	1,900	2,704	16,477	16,614
Nevada**	80,205,853	31,201,374	148,288,255	324,218,209	1,919	1,745	11,481	11,884	2,846	2,651	12,404	13,431
New Hampshire	141,437,846	42,015,447	248,851,786	293,360,697	2,262	2,582	20,257	19,254	2,767	3,162	21,315	20,555
New Jersey**	223,484,592	25,606,034	1,520,387,325	2,281,212,207	4,211	1,297	16,921	17,834	7,153	2,055	18,585	20,377
New Mexico**	66,346,839	26,065,291	239,332,194	347,053,650	1,210	1,567	15,146	14,753	1,670	2,273	16,526	17,139
New York*	1,440,573,630	2,349,536,151	8,292,225,228	14,007,417,480	1,662	2,447	21,411	22,750	2,659	3,521	24,501	25,106
North Carolina	1,002,155,120	693,764,432	1,738,057,886	2,654,895,435	1,416	2,786	11,125	11,432	1,598	3,194	11,680	12,284
North Dakota	51,041,108	34,016,643	170,838,460	168,395,074	1,508	1,851	18,800	17,650	1,818	2,354	20,012	18,919
Ohio*	779,304,189	546,167,194	3,021,639,583	4,256,326,029	1,290	2,159	22,141	15,413	1,529	2,644	23,108	16,285
Oklahoma*	275,711,323	61,614,097	588,330,410	695,709,669	1,212	1,413	9,805	11,636	1,605	2,007	10,691	13,229
Oregon**	71,562,399	111,007,529	304,388,964	309,237,210	1,103	2,007	12,268	10,782	1,529	2,722	12,948	11,542
Pennsylvania**	239,989,200	122,570,726	2,585,951,406	1,193,823,373	1,191	1,671	23,527	11,286	1,552	2,310	25,512	12,522
Rhode Island**	8,074,074	194,676	335,667,691	522,974,905	3,194	285	19,340	17,472	5,351	1,132	20,481	19,164
South Carolina	586,021,123	288,449,567	617,350,743	1,110,362,195	1,354	2,156	7,746	8,950	1,552	2,463	8,283	9,801
South Dakota	112,526,357	44,306,553	125,238,103	211,497,774	1,577	2,373	16,350	14,108	1,866	2,817	16,826	15,438
Tennessee**	29,618,349	16,142,358	15,247,124	11,573,149	493	602	2,158	1,339	918	1,124	3,335	2,883

TABLE A3.19

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS ENROLLEES, BY BASIS OF ELIGIBILITY

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	Children	Adults	Aged	Disabled	Children	Adults	Aged	Disabled	Children	Adults	Aged	Disabled
Texas*	1,793,087,427	874,994,669	3,097,932,504	3,697,934,100	1,431	2,658	10,769	11,758	1,667	3,162	12,311	13,432
Utah**	68,967,376	50,805,405	99,813,321	168,725,429	1,316	1,380	15,635	16,255	1,817	1,877	17,121	18,501
Vermont	140,067,573	82,078,743	148,089,256	238,581,057	2,016	1,648	7,498	12,289	2,266	2,065	8,219	13,043
Virginia**	219,965,888	60,178,248	834,599,263	1,064,768,021	1,572	1,870	11,613	13,351	2,153	2,441	12,285	14,724
Washington**	100,550,369	118,871,009	647,643,150	970,369,314	808	1,690	8,937	7,001	1,102	2,389	9,667	7,659
West Virginia	200,458,039	92,875,194	368,378,323	773,741,123	1,518	2,160	15,205	8,562	1,750	2,548	16,264	9,400
Wisconsin**	117,869,808	92,753,190	944,340,802	1,629,993,642	1,335	1,868	8,663	11,838	1,886	2,615	10,280	13,256
Wyoming	57,558,415	32,290,508	67,519,586	132,716,422	1,336	2,622	18,308	17,024	1,598	3,144	19,247	18,970

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

FFS enrollees = full-benefit Medicaid enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; HMO/HIO = health maintenance organization or health insuring organization.

TABLE A3.20

MEDICAID FEE-FOR-SERVICE (FFS) UTILIZATION AMONG FFS ENROLLEES, BY TYPE OF SERVICE

	Number Using Service				Percentage Using Service			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	3,704,856	1,618,093	18,501,677	22,025,784	13.2	5.8	66.0	78.5
Alabama	58,609	26,407	505,887	582,153	8.5	3.8	73.7	84.8
Alaska	13,772	2,035	70,976	104,346	11.1	1.6	57.1	83.9
Arizona**	27,664	1,027	6,118	85,140	16.0	0.6	3.5	49.2
Arkansas	72,803	25,492	365,850	491,237	13.3	4.7	67.1	90.1
California**	251,945	117,462	1,605,409	1,864,194	10.2	4.7	64.7	75.2
Colorado**	24,371	13,909	114,136	153,389	12.6	7.2	59.1	79.4
Connecticut**	25,875	31,585	102,688	110,289	19.4	23.7	77.1	82.8
Delaware**	2,554	3,719	10,346	11,638	15.4	22.4	62.4	70.2
District of Columbia**	10,277	5,068	26,534	32,882	22.4	11.0	57.8	71.6
Florida*	228,818	80,743	1,028,430	1,224,135	14.3	5.0	64.1	76.3
Georgia	213,623	41,802	987,816	1,204,587	14.2	2.8	65.5	79.9
Hawaii**	4,452	11,606	34,622	36,873	9.8	25.7	76.6	81.5
Idaho	21,670	7,172	128,362	163,157	11.0	3.6	65.2	82.8
Illinois	223,636	91,589	1,141,998	1,419,889	11.7	4.8	59.9	74.5
Indiana*	84,307	46,638	397,571	458,902	14.9	8.2	70.2	81.0
Iowa*	34,159	23,272	182,692	216,796	13.2	9.0	70.7	83.9
Kansas*	25,320	11,471	120,101	145,399	14.0	6.3	66.4	80.4
Kentucky	78,848	28,659	475,853	534,804	13.2	4.8	79.5	89.3
Louisiana	156,309	46,525	700,610	825,312	15.6	4.7	70.1	82.5
Maine	19,397	9,688	229,624	213,236	5.4	2.7	64.0	59.4
Maryland**	25,030	23,478	70,845	78,518	17.1	16.1	48.5	53.7
Massachusetts*	79,418	57,658	554,621	620,305	9.7	7.0	67.5	75.5
Michigan**	61,879	43,126	304,604	328,533	13.1	9.1	64.3	69.3
Minnesota**	29,257	16,948	132,399	158,474	13.4	7.8	60.7	72.6
Mississippi	101,863	23,911	534,186	607,874	14.3	3.4	75.0	85.4
Missouri*	88,550	39,886	455,632	496,554	14.8	6.7	76.4	83.2
Montana	15,730	5,929	68,404	93,168	14.6	5.5	63.5	86.5
Nebraska	25,609	13,214	164,619	193,184	11.5	5.9	73.9	86.7
Nevada**	12,079	5,674	56,264	73,750	12.1	5.7	56.3	73.8
New Hampshire	10,592	7,551	71,463	85,615	10.0	7.1	67.2	80.5
New Jersey**	51,549	47,531	203,366	217,518	17.7	16.4	70.0	74.9
New Mexico**	14,054	7,432	55,799	84,072	12.7	6.7	50.4	75.9
New York*	377,086	167,102	1,545,103	2,018,355	13.3	5.9	54.6	71.3
North Carolina	213,571	51,479	954,826	1,185,843	15.9	3.8	71.0	88.2
North Dakota	8,178	6,065	45,295	56,887	11.5	8.6	63.9	80.3
Ohio*	182,052	90,952	926,310	1,078,719	14.3	7.2	72.9	85.0
Oklahoma*	54,820	28,121	248,155	281,402	14.0	7.2	63.5	72.0
Oregon**	17,032	7,737	111,108	127,215	9.8	4.5	64.0	73.2
Pennsylvania**	59,608	78,370	330,447	349,426	12.2	16.0	67.4	71.2
Rhode Island**	8,098	11,534	41,301	41,499	16.0	22.8	81.8	82.2
South Carolina	105,280	20,615	549,137	661,329	13.7	2.7	71.3	85.8
South Dakota	15,307	6,526	66,447	93,528	13.6	5.8	59.0	83.0
Tennessee**	4,786	2,564	7,526	52,877	4.7	2.5	7.3	51.6
Texas*	375,933	111,209	1,562,615	1,829,972	17.2	5.1	71.5	83.8
Utah**	12,490	5,557	59,192	74,035	11.8	5.2	55.8	69.8
Vermont	9,702	3,672	110,633	124,156	6.1	2.3	69.8	78.4
Virginia**	50,750	29,110	222,824	253,366	15.7	9.0	68.8	78.3
Washington**	33,910	22,689	279,565	315,973	8.4	5.6	68.9	77.8
West Virginia	30,514	12,819	223,314	248,455	10.5	4.4	77.1	85.8
Wisconsin**	42,593	41,086	266,417	261,654	11.1	10.7	69.3	68.0
Wyoming	9,127	2,679	43,637	55,170	13.6	4.0	65.2	82.5

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

FFS enrollees = full-benefit Medicaid enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; IP = inpatient; ILTC = institutional long-term care; Rx = prescription drug; Other = all services other than IP, ILTC, and Rx.

TABLE A3.21

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS ENROLLEES, BY TYPE OF SERVICE

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	**21,366,873,692**	**49,135,928,400**	**26,524,005,146**	**59,223,542,703**	**762**	**1,752**	**945**	**2,111**	**5,767**	**30,367**	**1,434**	**2,689**
Alabama	188,972,881	746,057,701	478,051,449	1,000,796,187	275	1,087	697	1,458	3,224	28,252	945	1,719
Alaska	138,754,492	109,012,365	86,334,718	410,993,969	1,116	877	694	3,306	10,075	53,569	1,216	3,939
Arizona**	114,064,603	20,278,091	3,334,787	269,574,468	659	117	19	1,557	4,123	19,745	545	3,166
Arkansas	218,851,974	629,916,815	289,854,986	893,966,272	401	1,155	531	1,639	3,006	24,710	792	1,820
California**	1,927,734,219	3,328,561,259	3,307,143,965	6,048,862,323	777	1,342	1,334	2,439	7,651	28,337	2,060	3,245
Colorado**	125,735,392	374,148,050	198,468,084	615,487,147	651	1,936	1,027	3,185	5,159	26,900	1,739	4,013
Connecticut**	133,104,094	1,286,074,544	369,886,166	844,007,140	1,000	9,660	2,778	6,340	5,144	40,718	3,602	7,653
Delaware**	7,856,163	171,095,839	31,731,197	91,475,817	474	10,314	1,913	5,515	3,076	46,006	3,067	7,860
District of Columbia**	162,818,629	241,797,810	69,572,414	199,148,915	3,547	5,268	1,516	4,339	15,843	47,711	2,622	6,056
Florida*	1,106,849,364	2,249,942,152	1,726,735,792	2,431,759,585	690	1,403	1,076	1,516	4,837	27,865	1,679	1,987
Georgia	938,887,261	945,128,302	764,719,169	2,013,003,538	623	627	507	1,335	4,395	22,610	774	1,671
Hawaii**	33,541,764	178,750,255	80,770,095	123,060,260	742	3,952	1,786	2,721	7,534	15,402	2,333	3,337
Idaho	110,066,368	188,469,292	123,266,656	391,636,883	559	957	626	1,988	5,079	26,278	960	2,400
Illinois	2,015,638,015	2,192,129,931	1,206,082,157	2,270,992,133	1,058	1,151	633	1,192	9,013	23,934	1,056	1,599
Indiana*	339,609,865	1,183,756,286	611,355,793	1,078,151,834	600	2,091	1,080	1,904	4,028	25,382	1,538	2,349
Iowa*	135,965,324	627,691,100	269,561,729	568,996,664	526	2,429	1,043	2,202	3,980	26,972	1,475	2,625
Kansas*	126,064,281	253,178,382	179,197,032	528,255,365	697	1,400	991	2,921	4,979	22,071	1,492	3,633
Kentucky	306,593,353	709,142,485	666,020,683	1,224,698,521	512	1,184	1,112	2,045	3,888	24,744	1,400	2,290
Louisiana	593,376,523	975,172,503	710,916,692	1,044,226,471	593	975	711	1,044	3,796	20,960	1,015	1,265
Maine	262,737,781	269,105,936	259,837,874	1,001,565,343	732	750	724	2,792	13,545	27,777	1,132	4,697
Maryland**	228,367,541	862,235,927	204,623,695	428,179,344	1,562	5,897	1,400	2,928	9,124	36,725	2,888	5,453
Massachusetts*	363,604,767	1,878,858,083	926,884,384	2,183,649,324	443	2,287	1,128	2,658	4,578	32,586	1,671	3,520
Michigan**	237,347,272	1,151,103,600	548,855,524	441,923,826	501	2,430	1,159	933	3,836	26,692	1,802	1,345
Minnesota**	203,145,575	488,612,466	302,189,739	1,468,507,679	931	2,239	1,385	6,728	6,943	28,830	2,282	9,267
Mississippi	413,827,957	628,216,663	551,944,690	850,493,761	581	882	775	1,194	4,063	26,273	1,033	1,399
Missouri*	373,707,408	826,049,542	835,562,307	1,274,566,580	626	1,385	1,401	2,137	4,220	20,710	1,834	2,567
Montana	60,624,704	137,963,533	79,434,535	229,366,384	563	1,281	738	2,130	3,854	23,269	1,161	2,462
Nebraska	114,926,903	360,010,214	182,718,210	433,607,412	516	1,616	820	1,946	4,488	27,245	1,110	2,245
Nevada**	95,260,963	155,525,051	92,801,642	240,349,126	954	1,557	929	2,406	7,886	27,410	1,649	3,259
New Hampshire	33,676,152	200,988,357	101,100,617	389,900,650	317	1,890	951	3,667	3,179	26,617	1,415	4,554
New Jersey**	283,926,799	1,817,899,405	647,169,393	1,301,700,683	977	6,256	2,227	4,480	5,508	38,247	3,182	5,984
New Mexico**	59,160,822	195,843,682	73,658,388	350,135,082	534	1,767	665	3,160	4,210	26,351	1,320	4,165
New York*	4,169,294,843	8,769,148,065	2,975,743,089	10,175,566,492	1,473	3,098	1,051	3,595	11,057	52,478	1,926	5,042
North Carolina	824,262,500	1,361,296,014	1,113,853,626	2,789,460,733	613	1,012	828	2,074	3,859	26,444	1,167	2,352
North Dakota	32,867,021	200,520,941	52,963,176	137,940,147	464	2,830	747	1,947	4,019	33,062	1,169	2,425
Ohio*	1,055,246,303	3,139,239,331	1,389,869,775	3,019,081,586	831	2,472	1,095	2,378	5,796	34,515	1,500	2,799

TABLE A3.21

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS ENROLLEES, BY TYPE OF SERVICE

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
Oklahoma*	153,908,604	590,517,046	271,479,325	605,460,524	394	1,511	695	1,549	2,808	20,999	1,094	2,152
Oregon**	62,598,264	157,563,978	182,051,388	393,982,472	360	907	1,048	2,268	3,675	20,365	1,639	3,097
Pennsylvania**	244,319,286	2,662,225,898	660,909,204	574,880,317	498	5,427	1,347	1,172	4,099	33,970	2,000	1,645
Rhode Island**	56,162,566	490,691,714	114,858,659	205,198,407	1,112	9,717	2,274	4,063	6,935	42,543	2,781	4,945
South Carolina	435,261,744	559,612,942	458,430,687	1,148,878,255	565	726	595	1,491	4,134	27,146	835	1,737
South Dakota	72,213,412	148,648,708	66,274,010	206,432,657	641	1,319	588	1,832	4,718	22,778	997	2,207
Tennessee**	21,017,271	16,726,426	1,066,012	33,771,271	205	163	10	329	4,391	6,524	142	639
Texas*	1,646,440,159	2,628,891,549	1,391,267,131	3,797,349,861	754	1,204	637	1,739	4,380	23,639	890	2,075
Utah**	67,791,067	150,208,590	53,058,744	117,253,130	640	1,417	501	1,106	5,428	27,031	896	1,584
Vermont	39,192,763	85,710,972	116,824,456	367,088,438	247	541	737	2,317	4,040	23,342	1,056	2,957
Virginia**	193,836,422	786,855,284	438,006,933	760,812,781	599	2,431	1,353	2,350	3,819	27,030	1,966	3,003
Washington**	336,880,969	498,473,347	444,264,994	557,814,532	830	1,228	1,094	1,374	9,935	21,970	1,589	1,765
West Virginia	137,743,111	383,104,914	294,471,065	620,133,589	476	1,323	1,017	2,141	4,514	29,886	1,319	2,496
Wisconsin**	325,302,682	1,056,278,182	479,489,129	923,887,449	846	2,746	1,247	2,402	7,637	25,709	1,800	3,531
Wyoming	37,735,496	67,498,878	39,339,181	145,511,376	564	1,009	588	2,176	4,134	25,196	902	2,638

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

FFS enrollees = full-benefit Medicaid enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002;
IP = inpatient; ILTC = institutional long-term care; Rx = prescription drug; Other = all services other than IP, ILTC, and Rx.

TABLE A3.22

MEDICAID FEE-FOR-SERVICE (FFS) UTILIZATION AMONG FFS ENROLLEES, BY TYPE OF SERVICE: CHILDREN

	Number Using Service				Percentage Using Service			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	**961,564**	**38,098**	**7,442,342**	**9,961,130**	**7.5**	**0.3**	**58.3**	**78.0**
Alabama	11,395	3	283,162	351,377	2.7	0.0	68.3	84.8
Alaska	6,098	1,027	37,613	65,425	7.7	1.3	47.5	82.6
Arizona**	6,135	66	2,102	39,340	11.8	0.1	4.1	75.9
Arkansas	25,662	2,837	209,756	296,282	7.9	0.9	64.2	90.7
California**	21,049	431	322,494	480,715	2.8	0.1	43.2	64.4
Colorado**	3,693	59	39,817	66,035	4.2	0.1	45.1	74.8
Connecticut**	1,075	74	2,154	4,965	8.2	0.6	16.4	37.7
Delaware**	377	20	619	1,437	11.0	0.6	18.0	41.8
District of Columbia**	747	81	2,665	4,734	9.1	1.0	32.5	57.8
Florida*	35,375	24	400,060	549,809	4.8	0.0	54.6	75.0
Georgia	83,800	1	540,784	715,172	9.2	0.0	59.5	78.6
Hawaii**	176	1	127	683	6.8	0.0	4.9	26.5
Idaho	7,950	598	76,895	105,121	6.2	0.5	59.6	81.5
Illinois	54,278	3,499	578,498	801,760	5.5	0.4	58.7	81.3
Indiana*	26,283	918	192,401	236,947	8.8	0.3	64.2	79.1
Iowa*	9,962	674	72,218	98,323	8.3	0.6	60.0	81.7
Kansas*	8,215	194	52,754	72,977	8.7	0.2	56.0	77.4
Kentucky	14,156	1,630	220,115	263,575	4.8	0.6	74.7	89.4
Louisiana	31,443	1,818	418,099	521,964	4.9	0.3	64.9	81.0
Maine	7,305	554	68,185	92,445	7.0	0.5	65.3	88.5
Maryland**	1,889	615	1,535	4,187	11.4	3.7	9.2	25.2
Massachusetts*	12,684	243	152,788	206,770	4.5	0.1	54.5	73.8
Michigan**	21,281	87	62,596	91,009	13.6	0.1	39.9	58.0
Minnesota**	5,388	651	26,088	39,582	9.1	1.1	44.0	66.7
Mississippi	21,626	990	258,379	320,687	5.5	0.3	66.0	82.0
Missouri*	21,682	100	165,273	196,139	9.2	0.0	69.9	83.0
Montana	6,045	374	31,333	49,694	10.5	0.6	54.4	86.3
Nebraska	10,148	1,030	93,124	115,679	7.6	0.8	70.1	87.1
Nevada**	3,115	492	16,527	27,577	7.5	1.2	39.5	66.0
New Hampshire	4,043	239	35,896	49,247	6.5	0.4	57.4	78.8
New Jersey**	4,788	953	18,476	29,010	9.0	1.8	34.8	54.7
New Mexico**	4,051	456	18,872	39,047	7.4	0.8	34.4	71.2
New York*	77,868	4,588	359,164	520,931	9.0	0.5	41.4	60.1
North Carolina	73,251	1,243	441,909	619,709	10.4	0.2	62.5	87.6
North Dakota	3,031	91	18,920	27,339	9.0	0.3	55.9	80.7
Ohio*	54,004	754	386,506	497,181	8.9	0.1	64.0	82.3
Oklahoma*	17,541	2,095	125,386	157,626	7.7	0.9	55.1	69.3
Oregon**	5,340	199	31,970	43,236	8.2	0.3	49.3	66.6
Pennsylvania**	16,343	1,061	114,507	147,912	8.1	0.5	56.8	73.4
Rhode Island**	53	23	1,022	1,397	2.1	0.9	40.4	55.3
South Carolina	38,786	611	282,895	370,948	9.0	0.1	65.4	85.7
South Dakota	6,612	319	38,539	58,576	9.3	0.4	54.0	82.1
Tennessee**	2,593	244	2,761	31,859	4.3	0.4	4.6	53.0
Texas*	155,405	3,360	871,691	1,058,730	12.4	0.3	69.6	84.5
Utah**	5,620	35	26,138	35,465	10.7	0.1	49.9	67.7
Vermont	1,777	38	43,664	60,732	2.6	0.1	62.9	87.4
Virginia**	11,235	394	75,742	98,128	8.0	0.3	54.1	70.1
Washington**	2,147	8	61,625	86,549	1.7	0.0	49.5	69.5
West Virginia	8,650	959	92,360	112,147	6.6	0.7	69.9	84.9
Wisconsin**	4,974	1,212	40,332	59,544	5.6	1.4	45.7	67.4
Wyoming	4,420	125	25,806	35,407	10.3	0.3	59.9	82.2

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

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FFS enrollees = full-benefit Medicaid enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; IP = inpatient; ILTC = institutional long-term care; Rx = prescription drug; Other = all services other than IP, ILTC, and Rx.

TABLE A3.23

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS ENROLLEES, BY TYPE OF SERVICE: CHILDREN

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	**4,249,006,349**	**844,647,313**	**2,224,782,499**	**10,283,383,027**	**333**	**66**	**174**	**805**	**4,419**	**22,170**	**299**	**1,032**
Alabama	54,664,273	74,994	78,065,397	299,954,152	132	0	188	724	4,797	24,998	276	854
Alaska	66,854,819	43,203,318	11,447,159	135,543,779	844	546	145	1,712	10,963	42,067	304	2,072
Arizona**	26,750,723	481,703	250,347	61,677,967	516	9	5	1,190	4,360	7,299	119	1,568
Arkansas	76,154,877	64,765,670	54,056,132	243,308,701	233	198	166	745	2,968	22,829	258	821
California**	162,507,051	16,909,423	92,059,073	565,235,908	218	23	123	758	7,720	39,233	285	1,176
Colorado**	25,858,079	1,030,709	16,217,116	108,141,839	293	12	184	1,225	7,002	17,470	407	1,638
Connecticut**	8,509,736	10,865,916	3,217,990	22,217,470	647	826	245	1,688	7,916	146,837	1,494	4,475
Delaware**	1,408,675	304,457	179,655	3,948,318	409	88	52	1,147	3,737	15,223	290	2,748
District of Columbia**	11,651,202	1,400,063	1,965,085	48,254,010	1,422	171	240	5,891	15,597	17,285	737	10,193
Florida*	212,133,240	787,810	130,112,758	498,255,850	290	1	178	680	5,997	32,825	325	906
Georgia	298,044,352	145	132,218,188	656,832,655	328	0	145	722	3,557	145	244	918
Hawaii**	384,939	13,788	53,997	342,637	149	5	21	133	2,187	13,788	425	502
Idaho	36,321,229	5,820,870	16,951,571	85,451,498	282	45	131	663	4,569	9,734	220	813
Illinois	514,096,810	48,592,055	152,411,060	611,799,039	522	49	155	621	9,472	13,887	263	763
Indiana*	82,295,718	19,867,708	72,267,593	226,202,254	275	66	241	755	3,131	21,642	376	955
Iowa*	27,282,919	17,671,195	22,654,915	98,042,668	227	147	188	815	2,739	26,218	314	997
Kansas*	25,412,816	3,999,194	19,257,265	87,128,018	270	42	204	925	3,093	20,614	365	1,194
Kentucky	57,739,017	19,352,034	74,005,002	326,132,600	196	66	251	1,106	4,079	11,872	336	1,237
Louisiana	148,609,423	8,982,550	139,432,343	333,907,335	231	14	216	518	4,726	4,941	333	640
Maine	57,197,285	20,805,186	22,926,742	292,547,616	548	199	219	2,801	7,830	37,554	336	3,165
Maryland**	15,268,256	41,501,041	2,849,543	4,134,222	918	2,496	171	249	8,083	67,481	1,856	987
Massachusetts*	78,384,647	16,978,874	45,952,170	274,015,204	280	61	164	978	6,180	69,872	301	1,325
Michigan**	52,824,927	5,515,441	22,240,368	61,226,661	337	35	142	390	2,482	63,396	355	673
Minnesota**	28,991,440	8,760,537	10,372,924	90,793,576	489	148	175	1,531	5,381	13,457	398	2,294
Mississippi	118,710,227	7,377,432	65,955,359	249,878,419	303	19	169	639	5,489	7,452	255	779
Missouri*	81,000,267	1,521,196	64,773,774	183,848,532	343	6	274	778	3,736	15,212	392	937
Montana	18,186,490	11,005,330	7,913,947	77,029,146	316	191	137	1,337	3,009	29,426	253	1,550
Nebraska	39,641,008	27,611,493	30,981,685	126,518,482	299	208	233	953	3,906	26,807	333	1,094
Nevada**	12,525,598	16,417,045	5,419,323	45,843,887	300	393	130	1,097	4,021	33,368	328	1,662
New Hampshire	10,310,725	3,118,330	12,582,169	115,426,622	165	50	201	1,846	2,550	13,047	351	2,344
New Jersey**	23,416,469	64,472,327	13,332,672	122,263,124	441	1,215	251	2,304	4,891	67,652	722	4,215
New Mexico**	15,110,044	9,722,178	1,955,574	39,559,043	275	177	36	721	3,730	21,321	104	1,013
New York*	465,930,132	141,734,303	105,551,380	727,357,815	537	163	122	839	5,984	30,892	294	1,396
North Carolina	197,263,036	15,945,975	121,536,501	667,409,608	279	23	172	943	2,693	12,829	275	1,077
North Dakota	9,421,891	3,039,732	4,971,240	33,608,245	278	90	147	993	3,109	33,404	263	1,229
Ohio*	194,974,147	3,714,625	116,725,513	463,889,904	323	6	193	768	3,610	4,927	302	933

TABLE A3.23

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS ENROLLEES, BY TYPE OF SERVICE: CHILDREN

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
Oklahoma*	55,046,180	38,593,433	37,081,347	144,990,363	242	170	163	637	3,138	18,422	296	920
Oregon**	12,713,937	8,953,292	6,193,271	43,701,899	196	138	95	673	2,381	44,991	194	1,011
Pennsylvania**	47,840,838	22,934,454	37,400,848	131,813,060	237	114	186	654	2,927	21,616	327	891
Rhode Island**	370,208	483,548	545,944	6,674,374	146	191	216	2,640	6,985	21,024	534	4,778
South Carolina	112,012,325	18,926,737	77,464,341	377,617,720	259	44	179	872	2,888	30,977	274	1,018
South Dakota	25,790,945	7,761,596	10,264,496	68,709,320	361	109	144	963	3,901	24,331	266	1,173
Tennessee**	10,583,627	1,336,463	153,617	17,544,642	176	22	3	292	4,082	5,477	56	551
Texas*	572,154,014	29,727,430	269,400,690	921,805,293	457	24	215	736	3,682	8,847	309	871
Utah**	22,810,081	2,891,060	5,110,138	38,156,097	435	55	97	728	4,059	82,602	196	1,076
Vermont	8,381,185	288,784	12,591,717	118,805,887	121	4	181	1,710	4,716	7,600	288	1,956
Virginia**	42,943,972	5,385,731	32,868,248	138,767,937	307	38	235	992	3,822	13,669	434	1,414
Washington**	21,038,656	109,316	12,867,446	66,534,951	169	1	103	534	9,799	13,664	209	769
West Virginia	18,206,560	22,294,554	29,597,339	130,359,586	138	169	224	987	2,105	23,248	320	1,162
Wisconsin**	28,444,026	18,898,189	13,607,509	56,920,084	322	214	154	645	5,719	15,593	337	956
Wyoming	14,833,308	2,698,079	6,772,018	33,255,010	344	63	157	772	3,356	21,585	262	939

SOURCE: Medicaid Analytic Extract 2002.

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TABLE A3.24

MEDICAID FEE-FOR-SERVICE (FFS) UTILIZATION AMONG FFS ENROLLEES, BY TYPE OF SERVICE: ADULTS

	Number Using Service				Percentage Using Service			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	**929,329**	**4,537**	**3,015,103**	**3,788,232**	**17.9**	**0.1**	**58.1**	**73.0**
Alabama	18,919	2	39,827	45,353	33.4	0.0	70.3	80.0
Alaska	4,812	41	16,925	21,372	18.5	0.2	65.2	82.4
Arizona**	18,226	22	1,415	32,413	26.7	0.0	2.1	47.5
Arkansas	17,870	130	41,272	59,578	26.8	0.2	61.9	89.4
California**	61,527	192	182,659	240,044	16.0	0.0	47.4	62.3
Colorado**	8,861	7	18,553	28,783	23.3	0.0	48.8	75.8
Connecticut**	2,409	21	2,227	5,094	24.6	0.2	22.8	52.1
Delaware**	101	3	670	772	4.4	0.1	29.1	33.5
District of Columbia**	307	82	856	1,135	10.0	2.7	27.9	37.0
Florida*	67,154	34	163,548	215,349	22.8	0.0	55.5	73.1
Georgia	66,216	11	183,548	214,824	24.9	0.0	69.1	80.9
Hawaii**	402	19	381	1,291	10.6	0.5	10.0	33.9
Idaho	7,815	267	19,522	24,277	25.6	0.9	64.0	79.6
Illinois	74,249	168	230,604	268,016	21.5	0.0	66.7	77.5
Indiana*	17,090	25	56,472	64,769	19.6	0.0	64.9	74.5
Iowa*	7,347	14	29,134	35,369	16.3	0.0	64.8	78.7
Kansas*	5,070	5	14,215	17,478	20.7	0.0	58.1	71.4
Kentucky	20,484	23	70,301	79,126	22.7	0.0	77.9	87.7
Louisiana	35,080	924	80,647	93,500	31.2	0.8	71.8	83.2
Maine	6,934	47	47,960	52,181	10.2	0.1	70.4	76.6
Maryland**	5,075	79	2,605	8,197	13.9	0.2	7.2	22.5
Massachusetts*	15,295	206	123,183	134,933	7.0	0.1	56.1	61.5
Michigan**	20,475	39	51,551	62,522	22.6	0.0	56.9	69.0
Minnesota**	3,665	266	14,644	20,157	11.5	0.8	46.0	63.4
Mississippi	24,599	16	67,444	74,224	28.5	0.0	78.1	86.0
Missouri*	17,277	14	81,015	87,493	15.1	0.0	70.8	76.5
Montana	4,261	39	14,404	19,000	18.9	0.2	63.8	84.1
Nebraska	5,891	38	27,861	33,510	14.2	0.1	67.0	80.6
Nevada**	2,771	12	8,020	11,329	15.5	0.1	44.8	63.3
New Hampshire	2,681	1	11,336	12,587	16.5	0.0	69.7	77.3
New Jersey**	2,894	3	5,032	11,316	14.7	0.0	25.5	57.3
New Mexico**	2,542	4	6,474	11,142	15.3	0.0	38.9	67.0
New York*	103,910	1,048	434,698	639,513	10.8	0.1	45.3	66.6
North Carolina	50,257	46	176,992	211,525	20.2	0.0	71.1	85.0
North Dakota	2,490	9	11,035	13,919	13.6	0.0	60.1	75.7
Ohio*	32,592	73	177,469	199,073	12.9	0.0	70.2	78.7
Oklahoma*	10,740	96	23,235	27,783	24.6	0.2	53.3	63.7
Oregon**	5,273	136	31,918	38,127	9.5	0.2	57.7	68.9
Pennsylvania**	11,346	31	35,806	49,504	15.5	0.0	48.8	67.5
Rhode Island**	13	0	52	155	1.9	0.0	7.6	22.7
South Carolina	28,832	22	99,204	113,607	21.6	0.0	74.2	84.9
South Dakota	4,236	3	10,131	15,254	22.7	0.0	54.3	81.7
Tennessee**	1,382	23	2,967	13,969	5.2	0.1	11.1	52.1
Texas*	93,338	110	222,094	267,307	28.4	0.0	67.5	81.2
Utah**	4,439	5	19,771	24,795	12.1	0.0	53.7	67.3
Vermont	3,691	11	32,273	37,922	7.4	0.0	64.8	76.1
Virginia**	6,331	7	18,590	23,486	19.7	0.0	57.8	73.0
Washington**	7,459	69	36,823	46,521	10.6	0.1	52.3	66.1
West Virginia	6,920	31	31,902	35,046	16.1	0.1	74.2	81.5
Wisconsin**	5,102	61	27,498	33,662	10.3	0.1	55.4	67.8
Wyoming	2,679	2	8,340	9,930	21.8	0.0	67.7	80.6

SOURCE: Medicaid Analytic Extract 2002.

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TABLE A3.25

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS ENROLLEES, BY TYPE OF SERVICE: ADULTS

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	**4,376,222,424**	**57,449,816**	**1,616,893,320**	**5,459,902,748**	**843**	**11**	**311**	**1,051**	**4,709**	**12,663**	**536**	**1,441**
Alabama	76,309,982	54,804	13,234,437	32,189,968	1,347	1	234	568	4,034	27,402	332	710
Alaska	36,145,628	1,109,226	11,194,060	65,282,389	1,393	43	431	2,516	7,512	27,054	661	3,055
Arizona**	57,395,153	62,965	222,451	90,528,936	841	1	3	1,327	3,149	2,862	157	2,793
Arkansas	34,936,626	1,784,314	12,285,381	65,609,303	524	27	184	984	1,955	13,725	298	1,101
California**	315,784,363	3,457,090	96,127,766	296,107,999	820	9	250	769	5,132	18,006	526	1,234
Colorado**	37,455,761	246,420	6,948,595	36,246,206	986	6	183	954	4,227	35,203	375	1,259
Connecticut**	7,149,180	82,415	4,989,113	6,002,797	731	8	510	614	2,968	3,925	2,240	1,178
Delaware**	487,630	12,949	517,288	629,186	212	6	224	273	4,828	4,316	772	815
District of Columbia**	3,521,234	3,439,177	1,077,631	2,032,667	1,148	1,122	351	663	11,470	41,941	1,259	1,791
Florida*	222,728,858	250,627	80,334,086	274,390,326	756	1	273	931	3,317	7,371	491	1,274
Georgia	238,502,270	133,296	59,663,810	367,057,425	898	1	225	1,382	3,602	12,118	325	1,709
Hawaii**	1,628,068	36,121	159,976	903,389	428	9	42	237	4,050	1,901	420	700
Idaho	30,106,967	1,293,528	9,941,608	37,813,372	987	42	326	1,239	3,852	4,845	509	1,558
Illinois	352,451,321	953,246	104,029,683	321,442,197	1,020	3	301	930	4,747	5,674	451	1,199
Indiana*	48,811,501	68,135	29,147,625	97,024,768	561	1	335	1,115	2,856	2,725	516	1,498
Iowa*	26,998,974	74,544	13,659,020	53,425,929	601	2	304	1,189	3,675	5,325	469	1,511
Kansas*	17,809,525	13,302	5,632,572	19,706,768	728	1	230	805	3,513	2,660	396	1,128
Kentucky	58,540,249	213,623	41,979,033	165,161,277	649	2	465	1,830	2,858	9,288	597	2,087
Louisiana	109,696,283	2,106,288	34,211,512	141,107,991	976	19	304	1,256	3,127	2,280	424	1,509
Maine	68,322,932	420,155	32,911,081	108,252,904	1,004	6	483	1,590	9,853	8,939	686	2,075
Maryland**	38,713,885	1,752,153	2,865,746	12,158,532	1,064	48	79	334	7,628	22,179	1,100	1,483
Massachusetts*	84,341,483	3,409,761	86,048,539	190,044,541	384	16	392	866	5,514	16,552	699	1,408
Michigan**	70,410,260	2,214,877	15,430,499	68,065,161	778	24	170	752	3,439	56,792	299	1,089
Minnesota**	18,000,607	1,301,579	7,963,229	28,088,230	566	41	250	883	4,911	4,893	544	1,393
Mississippi	85,897,155	45,481	25,728,761	122,307,016	995	1	298	1,417	3,492	2,843	381	1,648
Missouri*	40,331,944	35,856	50,640,466	103,433,282	353	0	443	904	2,334	2,561	625	1,182
Montana	13,180,410	622,280	9,523,994	37,114,003	583	28	422	1,643	3,093	15,956	661	1,953
Nebraska	25,758,316	222,509	15,455,401	52,080,059	619	5	372	1,252	4,372	5,855	555	1,554
Nevada**	9,246,656	40,838	3,633,292	18,280,588	517	2	203	1,022	3,337	3,403	453	1,614
New Hampshire	7,263,538	2,464	9,035,979	25,713,466	446	0	555	1,580	2,709	2,464	797	2,043
New Jersey**	11,226,193	60,964	1,670,829	12,648,048	569	3	85	641	3,879	20,321	332	1,118
New Mexico**	9,141,924	19,678	1,187,453	15,716,236	550	1	71	945	3,596	4,920	183	1,411
New York*	1,130,037,464	25,999,477	350,464,880	843,034,330	1,177	27	365	878	10,875	24,809	806	1,318
North Carolina	195,544,401	153,204	95,109,207	402,957,620	785	1	382	1,618	3,891	3,331	537	1,905
North Dakota	8,486,571	85,131	5,549,193	19,895,748	462	5	302	1,083	3,408	9,459	503	1,429
Ohio*	137,362,490	521,811	107,053,359	301,229,534	543	2	423	1,191	4,215	7,148	603	1,513

TABLE A3.25

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS ENROLLEES, BY TYPE OF SERVICE: ADULTS

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
Oklahoma*	27,158,669	1,048,005	7,267,306	26,140,117	623	24	167	600	2,529	10,917	313	941
Oregon**	26,188,956	1,051,450	23,500,096	60,267,027	473	19	425	1,089	4,967	7,731	736	1,581
Pennsylvania**	45,080,105	161,955	29,116,574	48,212,092	615	2	397	657	3,973	5,224	813	974
Rhode Island**	69,934	0	33,131	91,611	102	0	49	134	5,380	#DIV/0!	637	591
South Carolina	89,138,981	250,194	42,023,616	157,036,776	666	2	314	1,174	3,092	11,372	424	1,382
South Dakota	14,690,431	11,662	4,139,118	25,465,342	787	1	222	1,364	3,468	3,887	409	1,669
Tennessee**	5,889,885	45,626	365,711	9,841,136	220	2	14	367	4,262	1,984	123	704
Texas*	377,086,194	490,129	79,304,178	418,114,168	1,146	1	241	1,270	4,040	4,456	357	1,564
Utah**	20,045,711	17,556	6,858,606	23,883,532	544	0	186	649	4,516	3,511	347	963
Vermont	14,003,580	22,238	15,286,282	52,766,643	281	0	307	1,059	3,794	2,022	474	1,391
Virginia**	19,108,510	16,350	10,637,568	30,415,820	594	1	331	945	3,018	2,336	572	1,295
Washington**	46,593,295	321,691	11,864,529	60,091,494	662	5	169	854	6,247	4,662	322	1,292
West Virginia	18,942,230	124,903	17,176,661	56,631,400	440	3	399	1,317	2,737	4,029	538	1,616
Wisconsin**	32,964,966	1,580,964	20,100,067	38,107,193	664	32	405	768	6,461	25,917	731	1,132
Wyoming	9,535,175	6,805	3,592,322	19,156,206	774	1	292	1,555	3,559	3,403	431	1,929

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

FFS enrollees = full-benefit Medicaid enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002;
IP = inpatient; ILTC = institutional long-term care; Rx = prescription drug; Other = all services other than IP, ILTC, and Rx.

TABLE A3.26

MEDICAID FEE-FOR-SERVICE (FFS) UTILIZATION AMONG FFS ENROLLEES, BY TYPE OF SERVICE: AGED

	Number Using Service				Percentage Using Service			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	**676,649**	**1,144,131**	**3,020,186**	**2,882,033**	**17.5**	**29.6**	**78.2**	**74.6**
Alabama	10,603	20,175	41,362	37,368	23.0	43.7	89.7	81.0
Alaska	924	624	5,678	5,924	14.0	9.4	85.9	89.6
Arizona**	898	532	763	3,097	4.2	2.5	3.6	14.5
Arkansas	10,521	16,124	32,758	34,207	27.0	41.3	84.0	87.7
California**	52,214	79,621	446,931	434,361	9.5	14.6	81.7	79.4
Colorado**	6,235	11,844	28,686	29,029	18.7	35.5	86.1	87.1
Connecticut**	10,485	25,676	47,629	46,885	19.9	48.6	90.2	88.8
Delaware**	1,248	3,022	4,967	5,050	21.1	51.0	83.9	85.3
District of Columbia**	2,359	3,262	5,407	7,037	24.7	34.1	56.6	73.7
Florida*	38,615	27,778	148,091	134,501	21.0	15.1	80.7	73.3
Georgia	20,104	33,385	73,582	69,348	23.2	38.5	84.9	80.0
Hawaii**	1,216	7,935	17,276	17,121	6.3	40.8	88.9	88.1
Idaho	2,036	4,296	10,193	9,882	17.9	37.9	89.9	87.1
Illinois	24,815	48,531	95,919	91,681	8.9	17.4	34.3	32.8
Indiana*	15,599	35,123	61,241	60,172	22.0	49.5	86.3	84.8
Iowa*	6,522	17,979	30,656	28,298	19.4	53.5	91.2	84.1
Kansas*	3,906	8,946	17,566	15,847	20.3	46.5	91.3	82.3
Kentucky	11,453	20,778	40,563	40,066	24.6	44.7	87.2	86.2
Louisiana	44,030	27,660	68,463	66,036	58.2	36.5	90.4	87.2
Maine	423	7,419	54,523	21,058	0.6	10.1	73.9	28.5
Maryland**	8,262	18,441	36,342	31,883	16.6	37.1	73.2	64.2
Massachusetts*	15,421	43,278	82,715	75,717	16.1	45.3	86.6	79.3
Michigan**	6,525	36,917	81,526	67,505	7.0	39.3	86.9	71.9
Minnesota**	3,732	8,347	15,815	15,888	9.5	21.2	40.1	40.3
Mississippi	21,109	16,101	69,332	68,252	28.2	21.5	92.7	91.2
Missouri*	14,681	32,384	81,964	78,059	15.7	34.6	87.5	83.3
Montana	1,780	4,493	8,211	7,938	19.2	48.4	88.4	85.4
Nebraska	4,091	9,889	20,354	18,987	18.6	45.1	92.8	86.5
Nevada**	1,995	3,755	11,030	11,209	15.4	29.1	85.4	86.8
New Hampshire	1,491	6,663	11,151	9,810	12.1	54.2	90.8	79.9
New Jersey**	17,401	33,561	77,992	71,009	19.4	37.4	86.8	79.0
New Mexico**	3,200	5,374	12,888	13,971	20.3	34.0	81.6	88.4
New York*	75,178	115,118	252,709	312,822	19.4	29.7	65.3	80.8
North Carolina	41,445	39,491	142,342	142,509	26.5	25.3	91.1	91.2
North Dakota	1,146	4,856	7,771	6,941	12.6	53.4	85.5	76.4
Ohio*	34,413	67,276	124,600	124,400	25.2	49.3	91.3	91.2
Oklahoma*	14,608	20,128	52,284	47,193	24.3	33.5	87.1	78.7
Oregon**	2,885	6,223	22,249	21,177	11.6	25.1	89.7	85.4
Pennsylvania**	15,280	68,299	95,557	62,639	13.9	62.1	86.9	57.0
Rhode Island**	3,062	8,780	15,427	13,348	17.6	50.6	88.9	76.9
South Carolina	14,726	15,930	65,099	66,976	18.5	20.0	81.7	84.0
South Dakota	1,522	4,929	7,023	6,252	19.9	64.3	91.7	81.6
Tennessee**	266	2,079	926	3,240	3.8	29.4	13.1	45.9
Texas*	68,455	80,183	227,582	239,384	23.8	27.9	79.1	83.2
Utah**	808	3,755	5,461	5,084	12.7	58.8	85.5	79.6
Vermont	1,676	3,250	17,578	8,741	8.5	16.5	89.0	44.3
Virginia**	17,195	23,209	63,947	61,757	23.9	32.3	89.0	85.9
Washington**	7,328	17,762	64,060	60,213	10.1	24.5	88.4	83.1
West Virginia	2,187	9,409	21,748	20,489	9.0	38.8	89.8	84.6
Wisconsin**	9,835	31,448	88,952	48,671	9.0	28.8	81.6	44.6
Wyoming	740	2,093	3,297	3,001	20.1	56.8	89.4	81.4

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

FFS enrollees = full-benefit Medicaid enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; IP = inpatient; ILTC = institutional long-term care; Rx = prescription drug; Other = all services other than IP, ILTC, and Rx.

TABLE A3.27

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS ENROLLEES, BY TYPE OF SERVICE: AGED

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	**1,819,511,538**	**29,641,912,903**	**7,138,310,071**	**9,528,142,447**	**471**	**7,677**	**1,849**	**2,468**	**2,689**	**25,908**	**2,364**	**3,306**
Alabama	13,027,976	524,302,735	88,579,649	105,805,863	282	11,367	1,921	2,294	1,229	25,988	2,142	2,831
Alaska	2,799,839	44,815,559	14,844,725	46,232,860	424	6,781	2,246	6,995	3,030	71,820	2,614	7,804
Arizona**	3,094,113	11,240,623	552,721	17,735,581	145	527	26	832	3,446	21,129	724	5,727
Arkansas	11,487,138	338,211,405	67,474,803	119,636,298	295	8,673	1,730	3,068	1,092	20,976	2,060	3,497
California**	241,639,014	1,843,938,680	942,294,279	1,235,915,479	442	3,372	1,723	2,260	4,628	23,159	2,108	2,845
Colorado**	13,897,017	304,409,919	72,420,571	118,480,193	417	9,135	2,173	3,555	2,229	25,702	2,525	4,081
Connecticut**	29,001,035	915,368,656	137,549,189	206,344,672	549	17,331	2,604	3,907	2,766	35,651	2,888	4,401
Delaware**	1,753,859	120,438,181	13,262,288	19,928,827	296	20,341	2,240	3,366	1,405	39,854	2,670	3,946
District of Columbia**	12,144,349	134,199,716	10,799,073	27,018,727	1,271	14,049	1,131	2,829	5,148	41,140	1,997	3,840
Florida*	63,082,410	725,863,014	342,681,267	229,560,771	344	3,955	1,867	1,251	1,634	26,131	2,314	1,707
Georgia	31,607,447	660,993,457	152,050,941	126,829,698	364	7,622	1,753	1,463	1,572	19,799	2,066	1,829
Hawaii**	4,728,156	140,609,013	29,405,364	32,097,029	243	7,238	1,514	1,652	3,888	17,720	1,702	1,875
Idaho	2,660,443	105,400,882	26,664,065	54,990,975	235	9,291	2,350	4,848	1,307	24,535	2,616	5,565
Illinois	123,694,468	889,456,038	224,890,485	151,468,653	443	3,185	805	542	4,985	18,328	2,345	1,652
Indiana*	26,112,093	730,145,955	188,675,933	116,666,692	368	10,292	2,660	1,645	1,674	20,788	3,081	1,939
Iowa*	9,310,071	351,444,283	77,453,662	85,049,497	277	10,451	2,303	2,529	1,427	19,547	2,527	3,005
Kansas*	8,755,666	166,276,865	48,486,404	73,484,878	455	8,639	2,519	3,818	2,242	18,587	2,760	4,637
Kentucky	15,177,524	461,080,245	125,084,609	90,838,504	326	9,914	2,690	1,953	1,325	22,191	3,084	2,267
Louisiana	55,060,032	484,580,095	205,794,432	83,726,583	727	6,401	2,718	1,106	1,251	17,519	3,006	1,268
Maine	7,912,638	184,731,425	71,770,305	67,996,661	107	2,503	972	921	18,706	24,900	1,316	3,229
Maryland**	40,434,289	613,865,136	92,088,376	85,472,970	814	12,359	1,854	1,721	4,894	33,288	2,534	2,681
Massachusetts*	20,891,784	1,296,331,144	168,305,765	192,944,746	219	13,576	1,763	2,021	1,355	29,954	2,035	2,548
Michigan**	5,920,550	946,987,239	178,951,317	110,786,669	63	10,090	1,907	1,180	907	25,652	2,195	1,641
Minnesota**	5,923,417	176,100,313	33,482,192	73,273,253	150	4,469	850	1,859	1,587	21,097	2,117	4,612
Mississippi	23,703,926	364,935,607	157,994,442	94,219,278	317	4,877	2,111	1,259	1,123	22,665	2,279	1,380
Missouri*	24,979,194	605,102,231	237,257,227	265,163,339	267	6,456	2,532	2,829	1,701	18,685	2,895	3,397
Montana	1,919,180	92,172,729	19,315,253	24,529,812	207	9,920	2,079	2,640	1,078	20,515	2,352	3,090
Nebraska	6,796,070	235,781,461	55,915,673	51,225,774	310	10,747	2,549	2,335	1,661	23,843	2,747	2,698
Nevada**	7,118,584	85,704,896	23,625,064	31,839,711	551	6,636	1,829	2,465	3,568	22,824	2,142	2,841
New Hampshire	2,304,630	178,510,377	30,098,237	37,938,542	188	14,531	2,450	3,088	1,546	26,791	2,699	3,867
New Jersey**	49,085,375	962,900,871	214,308,644	294,092,435	546	10,716	2,385	3,273	2,821	28,691	2,748	4,142
New Mexico**	5,332,684	125,906,480	25,371,964	82,721,066	337	7,968	1,606	5,235	1,666	23,429	1,969	5,921
New York*	550,467,408	4,711,778,812	615,634,725	2,414,344,283	1,421	12,166	1,590	6,234	7,322	40,930	2,436	7,718
North Carolina	40,498,996	831,028,883	368,127,062	498,402,945	259	5,319	2,356	3,190	977	21,044	2,586	3,497
North Dakota	1,705,912	135,516,869	19,588,237	14,027,442	188	14,913	2,156	1,544	1,489	27,907	2,521	2,021
Ohio*	73,975,739	2,133,464,701	374,336,528	439,862,615	542	15,633	2,743	3,223	2,150	31,712	3,004	3,536

TABLE A3.27

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS ENROLLEES, BY TYPE OF SERVICE: AGED

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
Oklahoma*	17,155,487	371,615,642	109,163,026	90,396,255	286	6,193	1,819	1,507	1,174	18,463	2,088	1,915
Oregon**	4,262,622	115,812,153	53,133,794	131,180,395	172	4,668	2,142	5,287	1,478	18,610	2,388	6,194
Pennsylvania**	26,768,196	2,144,766,767	297,740,180	116,676,263	244	19,513	2,709	1,062	1,752	31,403	3,116	1,863
Rhode Island**	6,235,086	271,264,436	35,877,288	22,290,881	359	15,629	2,067	1,284	2,036	30,896	2,326	1,670
South Carolina	47,555,040	342,175,149	117,651,429	109,969,125	597	4,293	1,476	1,380	3,229	21,480	1,807	1,642
South Dakota	1,882,401	95,827,492	19,167,302	8,360,908	246	12,510	2,502	1,092	1,237	19,442	2,729	1,337
Tennessee**	197,760	13,761,950	239,689	1,047,725	28	1,948	34	148	743	6,620	259	323
Texas*	87,959,548	1,559,583,738	512,395,112	937,994,106	306	5,422	1,781	3,261	1,285	19,450	2,251	3,918
Utah**	1,924,766	72,960,008	14,719,142	10,209,405	301	11,429	2,306	1,599	2,382	19,430	2,695	2,008
Vermont	2,153,217	77,116,055	36,518,423	32,301,561	109	3,905	1,849	1,636	1,285	23,728	2,078	3,695
Virginia**	34,566,742	495,787,160	169,556,738	134,688,623	481	6,899	2,359	1,874	2,010	21,362	2,652	2,181
Washington**	30,654,146	408,029,436	120,365,484	88,594,084	423	5,630	1,661	1,222	4,183	22,972	1,879	1,471
West Virginia	3,068,440	266,356,912	55,701,717	43,251,254	127	10,994	2,299	1,785	1,403	28,309	2,561	2,111
Wisconsin**	16,258,737	724,620,645	131,756,903	71,704,517	149	6,647	1,209	658	1,653	23,042	1,481	1,473
Wyoming	866,324	48,640,865	9,188,373	8,824,024	235	13,189	2,491	2,393	1,171	23,240	2,787	2,940

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

FFS enrollees = full-benefit Medicaid enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002;
IP = inpatient; ILTC = institutional long-term care; Rx = prescription drug; Other = all services other than IP, ILTC, and Rx.

TABLE A3.28

MEDICAID FEE-FOR-SERVICE (FFS) UTILIZATION AMONG FFS ENROLLEES, BY TYPE OF SERVICE: DISABLED

	Number Using Service				Percentage Using Service			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	**1,137,308**	**431,327**	**5,024,043**	**5,394,388**	**18.2**	**6.9**	**80.6**	**86.6**
Alabama	17,692	6,227	141,536	148,055	10.5	3.7	83.7	87.6
Alaska	1,938	343	10,760	11,625	15.4	2.7	85.3	92.2
Arizona**	2,405	407	1,838	10,290	7.6	1.3	5.8	32.4
Arkansas	18,750	6,401	82,064	101,170	16.6	5.7	72.5	89.3
California**	117,155	37,218	653,325	709,074	14.6	4.6	81.5	88.4
Colorado**	5,582	1,999	27,080	29,542	16.6	5.9	80.5	87.8
Connecticut**	11,906	5,814	50,678	53,345	20.7	10.1	88.3	93.0
Delaware**	828	674	4,090	4,380	16.8	13.7	83.1	89.0
District of Columbia**	6,864	1,643	17,606	19,976	27.4	6.5	70.2	79.6
Florida*	87,674	52,907	316,731	324,476	22.3	13.5	80.5	82.5
Georgia	43,502	8,405	189,902	205,243	17.7	3.4	77.2	83.5
Hawaii**	2,658	3,651	16,838	17,778	13.7	18.8	86.7	91.6
Idaho	3,869	2,011	21,752	23,877	14.8	7.7	83.1	91.2
Illinois	70,294	39,391	236,977	258,432	23.8	13.4	80.4	87.7
Indiana*	25,335	10,572	87,457	97,014	23.3	9.7	80.5	89.3
Iowa*	10,328	4,605	50,684	54,806	17.3	7.7	85.1	92.1
Kansas*	8,129	2,326	35,566	39,097	18.9	5.4	82.9	91.1
Kentucky	32,755	6,228	144,874	152,037	19.6	3.7	86.6	90.9
Louisiana	45,756	16,123	133,401	143,812	27.3	9.6	79.5	85.7
Maine	4,735	1,668	58,956	47,552	4.2	1.5	52.4	42.3
Maryland**	9,804	4,343	30,363	34,251	22.5	10.0	69.8	78.7
Massachusetts*	36,018	13,931	195,935	202,885	15.9	6.2	86.6	89.6
Michigan**	13,598	6,083	108,931	107,497	10.3	4.6	82.2	81.1
Minnesota**	16,472	7,684	75,852	82,847	18.8	8.8	86.4	94.4
Mississippi	34,529	6,804	139,031	144,711	21.6	4.3	87.1	90.6
Missouri*	34,910	7,388	127,380	134,863	23.0	4.9	83.8	88.7
Montana	3,644	1,023	14,456	16,536	20.1	5.6	79.6	91.0
Nebraska	5,479	2,257	23,280	25,008	20.7	8.5	87.7	94.3
Nevada**	4,193	1,415	20,685	23,633	15.4	5.2	75.8	86.6
New Hampshire	2,377	648	13,080	13,971	15.6	4.3	85.8	91.7
New Jersey**	26,466	13,014	101,865	106,183	20.7	10.2	79.6	83.0
New Mexico**	4,261	1,598	17,565	19,912	18.1	6.8	74.7	84.6
New York*	120,130	46,348	498,532	545,089	19.5	7.5	81.0	88.5
North Carolina	48,618	10,699	193,583	212,100	20.9	4.6	83.4	91.3
North Dakota	1,511	1,109	7,569	8,688	15.8	11.6	79.3	91.1
Ohio*	61,043	22,849	237,735	258,065	22.1	8.3	86.1	93.4
Oklahoma*	11,931	5,802	47,250	48,800	20.0	9.7	79.0	81.6
Oregon**	3,534	1,179	24,971	24,675	12.3	4.1	87.1	86.0
Pennsylvania**	16,639	8,979	84,577	89,371	15.7	8.5	80.0	84.5
Rhode Island**	4,970	2,731	24,800	26,599	16.6	9.1	82.9	88.9
South Carolina	22,936	4,052	101,939	109,798	18.5	3.3	82.2	88.5
South Dakota	2,937	1,275	10,754	13,446	19.6	8.5	71.7	89.7
Tennessee**	545	218	872	3,809	6.3	2.5	10.1	44.1
Texas*	58,735	27,556	241,248	264,551	18.7	8.8	76.7	84.1
Utah**	1,623	1,762	7,822	8,691	15.6	17.0	75.4	83.7
Vermont	2,558	373	17,118	16,761	13.2	1.9	88.2	86.3
Virginia**	15,989	5,500	64,545	69,995	20.0	6.9	80.9	87.8
Washington**	16,976	4,850	117,057	122,690	12.2	3.5	84.4	88.5
West Virginia	12,757	2,420	77,304	80,773	14.1	2.7	85.5	89.4
Wisconsin**	22,682	8,365	109,635	119,777	16.5	6.1	79.6	87.0
Wyoming	1,288	459	6,194	6,832	16.5	5.9	79.5	87.6

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

FFS enrollees = full-benefit Medicaid enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; IP = inpatient; ILTC = institutional long-term care; Rx = prescription drug; Other = all services other than IP, ILTC, and Rx.

TABLE A3.29

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS ENROLLEES, BY TYPE OF SERVICE: DISABLED

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	**10,922,116,550**	**18,591,918,368**	**15,544,018,903**	**33,952,096,530**	**1,753**	**2,983**	**2,494**	**5,448**	**9,603**	**43,104**	**3,094**	**6,294**
Alabama	44,970,650	221,625,168	298,171,966	562,846,204	266	1,311	1,764	3,330	2,542	35,591	2,107	3,802
Alaska	32,954,206	19,884,262	48,848,774	163,934,941	2,614	1,577	3,874	13,002	17,004	57,972	4,540	14,102
Arizona**	26,824,614	8,492,800	2,309,268	99,631,984	845	267	73	3,138	11,154	20,867	1,256	9,682
Arkansas	96,273,333	225,155,426	156,038,670	465,411,970	850	1,988	1,378	4,109	5,135	35,175	1,901	4,600
California**	1,207,803,791	1,464,256,066	2,176,662,847	3,951,602,937	1,506	1,826	2,715	4,929	10,309	39,343	3,332	5,573
Colorado**	48,524,535	68,461,002	102,881,802	352,618,909	1,443	2,036	3,059	10,485	8,693	34,248	3,799	11,936
Connecticut**	88,444,143	359,757,557	224,129,874	609,442,201	1,541	6,270	3,906	10,621	7,429	61,878	4,423	11,425
Delaware**	4,205,999	50,340,252	17,771,966	66,969,486	855	10,232	3,612	13,612	5,080	74,689	4,345	15,290
District of Columbia**	135,501,844	102,758,854	55,730,625	121,843,511	5,401	4,096	2,221	4,857	19,741	62,543	3,165	6,099
Florida*	608,904,856	1,523,040,701	1,173,607,681	1,429,552,638	1,548	3,872	2,984	3,635	6,945	28,787	3,705	4,406
Georgia	370,727,336	284,001,404	420,786,230	862,283,694	1,508	1,155	1,711	3,506	8,522	33,790	2,216	4,201
Hawaii**	26,800,601	38,091,333	51,150,758	89,717,205	1,381	1,962	2,635	4,622	10,083	10,433	3,038	5,047
Idaho	40,977,729	75,954,012	69,709,412	213,381,038	1,565	2,901	2,662	8,150	10,591	37,769	3,205	8,937
Illinois	1,025,395,416	1,253,128,592	724,750,929	1,186,282,244	3,479	4,252	2,459	4,025	14,587	31,813	3,058	4,590
Indiana*	182,390,553	433,674,488	321,264,642	638,258,120	1,679	3,993	2,958	5,876	7,199	41,021	3,673	6,579
Iowa*	72,373,360	258,501,078	155,794,132	332,478,570	1,216	4,342	2,617	5,584	7,007	56,135	3,074	6,066
Kansas*	74,086,274	82,889,021	105,820,791	347,935,701	1,726	1,931	2,466	8,107	9,114	35,636	2,975	8,899
Kentucky	175,136,563	228,496,583	424,952,039	642,566,140	1,047	1,366	2,540	3,841	5,347	36,689	2,933	4,226
Louisiana	280,010,785	479,503,570	331,478,405	485,484,562	1,670	2,859	1,976	2,895	6,120	29,740	2,485	3,376
Maine	129,304,926	63,149,170	132,229,746	532,768,162	1,150	562	1,176	4,739	27,308	37,859	2,243	11,204
Maryland**	133,951,111	205,117,597	106,820,030	326,413,620	3,078	4,713	2,454	7,499	13,663	47,229	3,518	9,530
Massachusetts*	179,986,853	562,138,304	626,577,910	1,526,644,833	795	2,483	2,768	6,744	4,997	40,352	3,198	7,525
Michigan**	108,191,535	196,386,043	332,233,340	201,845,335	817	1,482	2,508	1,524	7,956	32,284	3,050	1,878
Minnesota**	150,230,111	302,450,037	250,371,394	1,276,352,620	1,712	3,447	2,854	14,547	9,120	39,361	3,301	15,406
Mississippi	185,516,649	255,858,143	302,266,128	384,089,048	1,162	1,602	1,893	2,405	5,373	37,604	2,174	2,654
Missouri*	227,396,003	219,390,259	482,890,840	722,121,427	1,496	1,443	3,176	4,750	6,514	29,695	3,791	5,354
Montana	27,338,624	34,163,194	42,681,341	90,693,423	1,505	1,880	2,349	4,991	7,502	33,395	2,953	5,485
Nebraska	42,731,509	96,394,751	80,365,451	203,783,097	1,611	3,633	3,029	7,681	7,799	42,709	3,452	8,149
Nevada**	66,359,150	53,362,272	60,123,862	144,372,925	2,432	1,956	2,204	5,292	15,826	37,712	2,907	6,109
New Hampshire	13,797,259	19,357,186	49,384,232	210,822,020	906	1,270	3,241	13,837	5,804	29,872	3,776	15,090
New Jersey**	200,198,762	790,465,243	417,856,996	872,691,206	1,565	6,180	3,267	6,822	7,564	60,740	4,102	8,219
New Mexico**	29,576,170	60,195,346	45,143,397	212,138,737	1,257	2,559	1,919	9,018	6,941	37,669	2,570	10,654
New York*	2,022,859,839	3,889,635,473	1,904,092,104	6,190,830,064	3,285	6,317	3,092	10,055	16,839	83,922	3,819	11,357
North Carolina	390,956,067	514,167,952	529,080,856	1,220,690,560	1,683	2,214	2,278	5,256	8,041	48,058	2,733	5,755
North Dakota	13,252,647	61,879,209	22,854,506	70,408,712	1,389	6,486	2,395	7,380	8,771	55,797	3,019	8,104
Ohio*	648,933,927	1,001,538,194	791,754,375	1,814,099,533	2,350	3,627	2,867	6,569	10,631	43,833	3,330	7,030

TABLE A3.29

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS ENROLLEES, BY TYPE OF SERVICE: DISABLED

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
Oklahoma*	54,548,268	179,259,966	117,967,646	343,933,789	912	2,998	1,973	5,753	4,572	30,896	2,497	7,048
Oregon**	19,432,749	31,747,083	99,224,227	158,833,151	678	1,107	3,460	5,538	5,499	26,927	3,974	6,437
Pennsylvania**	124,630,147	494,362,722	296,651,602	278,178,902	1,178	4,673	2,804	2,630	7,490	55,058	3,507	3,113
Rhode Island**	49,487,338	218,943,730	78,402,296	176,141,541	1,653	7,314	2,619	5,885	9,957	80,170	3,161	6,622
South Carolina	186,555,398	198,260,862	221,291,301	504,254,634	1,504	1,598	1,784	4,065	8,134	48,929	2,171	4,593
South Dakota	29,849,635	45,047,958	32,703,094	103,897,087	1,991	3,005	2,182	6,931	10,163	35,332	3,041	7,727
Tennessee**	4,345,999	1,582,387	306,995	5,337,768	503	183	36	617	7,974	7,259	352	1,401
Texas*	609,240,403	1,039,090,252	530,167,151	1,519,436,294	1,937	3,304	1,686	4,831	10,373	37,708	2,198	5,743
Utah**	23,010,509	74,339,966	26,370,858	45,004,096	2,217	7,162	2,541	4,336	14,178	42,191	3,371	5,178
Vermont	14,654,781	8,283,895	52,428,034	163,214,347	755	427	2,701	8,407	5,729	22,209	3,063	9,738
Virginia**	97,217,198	285,666,043	224,944,379	456,940,401	1,219	3,582	2,821	5,730	6,080	51,939	3,485	6,528
Washington**	238,594,872	90,012,904	299,167,535	342,594,003	1,721	649	2,158	2,472	14,055	18,559	2,556	2,792
West Virginia	97,525,881	94,328,545	191,995,348	389,891,349	1,079	1,044	2,124	4,314	7,645	38,979	2,484	4,827
Wisconsin**	247,634,953	311,178,384	314,024,650	757,155,655	1,799	2,260	2,281	5,499	10,918	37,200	2,864	6,321
Wyoming	12,500,689	16,153,129	19,786,468	84,276,136	1,603	2,072	2,538	10,810	9,706	35,192	3,194	12,336

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

FFS enrollees = full-benefit Medicaid enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002;
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Also see tables A3.11-A3.14 and A5.5.

TABLE A3.29

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS ENROLLEES, BY TYPE OF SERVICE: DISABLED

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
Oklahoma*	54,548,268	179,259,966	117,967,646	343,933,789	912	2,998	1,973	5,753	4,572	30,896	2,497	7,048
Oregon**	19,432,749	31,747,083	99,224,227	158,833,151	678	1,107	3,460	5,538	5,499	26,927	3,974	6,437
Pennsylvania**	124,630,147	494,362,722	296,651,602	278,178,902	1,178	4,673	2,804	2,630	7,490	55,058	3,507	3,113
Rhode Island**	49,487,338	218,943,730	78,402,296	[illegible]	1,653	7,314	2,619	5,885	9,957	80,170	3,161	6,622
South Carolina	186,555,398	198,260,862	221,291,301	504,254,634	1,504	1,598	1,784	4,065	8,134	48,929	2,171	4,593
South Dakota	29,849,635	45,047,958	[illegible]	[illegible]	1,991	3,005	2,182	6,931	10,163	35,332	3,041	7,727
Tennessee**	4,345,999	1,582,387	306,995	5,337,768	503	183	36	617	7,974	7,259	352	1,401
Texas*	609,240,403	1,039,090,252	[illegible]	[illegible]	1,937	3,304	1,686	4,831	10,373	37,708	2,198	5,743
Utah**	23,010,509	74,339,966	26,370,858	45,004,096	2,217	7,162	2,541	4,336	14,178	42,191	3,371	5,178
Vermont	14,654,781	8,283,863	[illegible]	[illegible]	355	427	2,701	8,407	5,729	22,209	3,063	9,738
Virginia**	97,217,198	285,666,043	[illegible]	416,940,401	1,219	3,582	2,821	5,730	6,080	51,939	3,485	6,528
Washington**	238,594,872	90,012,[illegible]	[illegible]	[illegible]	1,721	649	2,158	2,472	14,055	18,559	2,556	2,792
West Virginia	97,525,881	94,328,545	[illegible]	[illegible]	1,079	1,044	2,124	4,314	7,645	38,979	2,484	4,827
Wisconsin**	247,634,953	[illegible]	[illegible]	[illegible]	1,799	2,260	2,281	5,499	10,918	37,200	2,864	6,321
Wyoming	12,500,689	16,153,129	[illegible]	34,276,136	1,603	2,072	2,538	10,810	9,706	35,192	3,194	12,336

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in the state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in the state.

FFS enrollees = full-benefit Medicaid enrollees who were enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002;
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Also see tables A3.11-A3.14 and A5.5.

TABLE A4.1

MANAGED CARE (MC) ENROLLMENT COMBINATIONS IN JUNE 2002

		Percentage with:																
	Number of Enrollees in June 2002	No MC	HMO/HIO Only	Dental Plan Only	BHO Only	PCCM Only	Other MC Only	HMO/HIO & Dental	HMO/HIO & BHO	HMO/HIO & Other MC	HMO/HIO & Dental & BHO	Dental & PCCM	BHO & PCCM	Other MC & PCCM	Dental & BHO & PCCM	Dental & BHO	Other
United States	**41,118,330**	**41.7**	**19.1**	**5.1**	**3.5**	**8.7**	**1.3**	**7.3**	**9.4**	**0.0**	**0.7**	**0.2**	**1.4**	**1.2**	**0.0**	**0.2**	**0.1**
Alabama	703,583	37.1	0.5	0.0	0.0	4.7	19.2	0.0	0.0	0.0	0.0	0.0	0.0	38.5	0.0	0.0	0.0
Alaska	92,345	100.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Arizona	803,825	12.1	83.4	0.0	0.0	0.0	4.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Arkansas	492,147	89.2	0.0	0.0	0.0	10.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
California	7,474,761	30.0	2.4	27.5	0.0	0.0	0.0	39.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.3
Colorado	329,883	6.2	0.2	0.0	32.3	0.1	0.0	0.0	44.6	0.0	0.0	0.0	16.7	0.0	0.0	0.0	0.0
Connecticut	407,996	31.6	68.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Delaware	115,312	24.8	75.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
District of Columbia	129,808	34.8	65.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Florida	2,070,913	38.8	29.6	0.0	3.3	28.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Georgia	1,090,647	38.2	0.0	0.0	0.0	61.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Hawaii	158,555	25.0	73.2	0.0	0.3	0.0	0.0	0.0	1.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Idaho	152,411	61.3	0.0	0.0	0.0	38.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Illinois	1,646,486	92.0	7.1	0.0	0.0	0.0	0.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Indiana	723,175	32.8	28.5	0.0	0.0	37.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.5
Iowa	271,034	16.4	0.0	0.0	37.6	0.0	0.0	0.0	21.3	0.0	0.0	0.0	24.8	0.0	0.0	0.0	0.0
Kansas	215,195	26.6	34.8	0.0	0.0	38.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Kentucky	620,695	13.7	18.5	0.0	0.0	11.7	19.9	0.0	0.0	0.2	0.0	0.0	0.0	36.1	0.0	0.0	0.0
Louisiana	827,767	74.9	0.0	0.0	0.0	25.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Maine	307,490	64.5	0.0	0.0	0.0	35.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Maryland	625,666	27.2	72.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Massachusetts	1,002,798	34.2	23.8	0.0	2.1	0.1	0.1	0.0	0.0	0.0	0.0	0.0	39.1	0.0	0.0	0.0	0.7
Michigan	1,226,868	0.0	0.0	0.0	35.5	0.0	0.0	0.0	57.9	0.0	4.3	0.0	0.0	0.0	0.0	2.2	0.0
Minnesota	520,288	36.7	63.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Mississippi	582,224	100.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Missouri	942,465	55.4	44.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Montana	79,066	33.9	0.0	0.0	0.0	66.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1
Nebraska	215,609	24.4	0.0	0.0	43.5	0.0	0.0	0.0	14.9	0.0	0.0	0.0	17.2	0.0	0.0	0.0	0.0
Nevada	144,286	62.4	37.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
New Hampshire	87,808	89.7	10.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
New Jersey	831,336	32.8	63.5	0.0	0.0	0.0	3.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
New Mexico	380,722	35.8	64.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
New York	3,364,341	67.4	31.7	0.0	0.2	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
North Carolina	1,107,957	34.9	1.9	0.0	0.0	63.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
North Dakota	54,149	39.4	1.1	0.0	0.0	59.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Ohio	1,410,735	73.1	26.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Oklahoma	495,688	31.3	38.3	0.0	0.0	0.4	30.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Oregon	453,245	14.6	0.2	5.1	2.6	0.1	0.1	4.0	1.2	0.0	55.1	0.2	0.1	0.0	2.5	14.3	0.0
Pennsylvania	1,420,974	21.3	9.7	0.0	0.0	9.5	0.0	0.0	59.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Rhode Island	172,422	28.0	72.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
South Carolina	798,351	91.9	5.7	0.0	0.0	0.0	2.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
South Dakota	90,428	0.0	0.0	24.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	75.7	0.0	0.0	0.0	0.0	0.0

TABLE A4.1

MANAGED CARE (MC) ENROLLMENT COMBINATIONS IN JUNE 2002

	Number of Enrollees in June 2002	Percentage with:															
		No MC	HMO/HIO Only	Dental Plan Only	BHO Only	PCCM Only	Other MC Only	HMO/HIO & Dental	HMO/HIO & BHO	HMO/HIO & Other MC	HMO/HIO & Dental & BHO	Dental & PCCM	BHO & PCCM	Other MC & PCCM	Dental & BHO & PCCM	Dental & BHO	Other
Tennessee	1,447,879	0.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Texas	2,383,807	61.3	19.3	0.0	3.3	10.2	0.0	0.0	4.4	0.0	0.0	0.0	1.5	0.0	0.0	0.0	0.0
Utah	153,529	4.9	0.1	0.0	38.9	0.0	0.0	0.0	56.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Vermont	128,067	37.6	0.0	0.0	0.0	62.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Virginia	546,327	42.8	43.9	0.0	0.0	13.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Washington	887,828	0.3	0.0	0.0	51.4	0.0	0.0	0.0	47.8	0.0	0.0	0.0	0.4	0.0	0.0	0.0	0.0
West Virginia	277,117	49.3	17.4	0.0	0.0	33.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1
Wisconsin	601,784	46.4	51.5	0.0	0.1	0.0	2.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Wyoming	50,538	100.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

SOURCE: Medicaid Analytic Extract 2002 Person Summary File.

BHO = behavioral health organization; FFS = fee-for-service; HMO/HIO = health maintenance organization or health insuring organization; PCCM = primary care case management.

TABLE A4.2

CAPITATED PAYMENTS IN 2002, BY TYPE OF PLAN

	Total Capitated Payments	Capitated Payments, by Type of Plan			Percentage of Total			Capitated Payments per Person per Month		
		HMO/HIO	PHP	PCCM	HMO/HIO	PHP	PCCM	HMO/HIO	PHP	PCCM
United States	**33,231,950,731**	**28,507,759,729**	**4,543,520,331**	**180,670,671**	**85.8**	**13.7**	**0.5**	**166**	**33**	**3**
Alabama	311,278,093	0	300,096,484	11,181,609	0.0	96.4	3.6	-	61	3
Alaska	0	0	0	0	-	-	-	-	-	-
Arizona	2,517,118,867	2,249,396,560	267,722,307	0	89.4	10.6	0.0	277	449	-
Arkansas	18,078,991	0	0	18,078,991	0.0	0.0	100.0	-	-	13
California	4,802,644,142	4,227,954,894	574,598,106	91,142	88.0	12.0	0.0	112	9	-
Colorado	457,170,307	330,843,189	124,693,009	1,634,109	72.4	27.3	0.4	186	33	2
Connecticut	550,479,483	550,479,483	0	0	100.0	0.0	0.0	165	-	-
Delaware	198,678,369	196,834,011	1,844,358	0	99.1	0.9	0.0	186	6	-
District of Columbia	205,755,438	205,755,438	0	0	100.0	0.0	0.0	203	-	-
Florida	1,168,485,378	1,120,034,183	24,905,254	23,545,941	95.9	2.1	2.0	153	29	3
Georgia	27,983,802	0	0	27,983,802	0.0	0.0	100.0	-	-	3
Hawaii	234,433,761	226,294,953	8,138,808	0	96.5	3.5	0.0	158	225	-
Idaho	2,622,668	0	0	2,622,668	0.0	0.0	100.0	-	-	4
Illinois	206,736,433	179,623,314	27,113,119	0	86.9	13.1	0.0	124	143	-
Indiana	324,296,644	314,975,701	0	9,320,943	97.1	0.0	2.9	128	-	3
Iowa	181,906,150	94,561,353	85,928,323	1,416,474	52.0	47.2	0.8	135	31	2
Kansas	129,757,023	128,056,865	0	1,700,158	98.7	0.0	1.3	156	-	2
Kentucky	406,242,313	353,294,956	38,712,025	14,235,332	87.0	9.5	3.5	252	8	4
Louisiana	7,634,100	0	0	7,634,100	0.0	0.0	100.0	-	-	3
Maine	3,009,621	0	0	3,009,621	0.0	0.0	100.0	-	-	2
Maryland	1,067,855,088	1,067,855,088	0	0	100.0	0.0	0.0	195	-	-
Massachusetts	650,854,613	359,694,342	291,160,271	0	55.3	44.7	0.0	121	58	-
Michigan	1,777,038,823	1,439,124,209	337,914,614	0	81.0	19.0	0.0	157	23	-
Minnesota	1,049,848,303	1,049,848,303	0	0	100.0	0.0	0.0	266	-	-
Mississippi	2,758,440	0	0	2,758,440	0.0	0.0	100.0	-	-	3
Missouri	627,790,395	627,790,395	0	0	100.0	0.0	0.0	126	-	-
Montana	1,702,287	2,160	0	1,700,127	0.1	0.0	99.9	-	-	3
Nebraska	55,619,798	54,794,878	0	824,920	98.5	0.0	1.5	143	-	2
Nevada	107,117,343	107,117,343	0	0	100.0	0.0	0.0	150	-	-
New Hampshire	19,578,581	19,578,581	0	0	100.0	0.0	0.0	180	-	-
New Jersey	1,108,379,861	1,102,268,356	6,111,505	0	99.4	0.6	0.0	176	17	-
New Mexico	789,390,318	789,390,318	0	0	100.0	0.0	0.0	271	-	-
New York	2,622,912,329	2,318,415,009	304,497,320	0	88.4	11.6	0.0	173	2,851	-
North Carolina	58,665,457	30,310,084	0	28,355,373	51.7	0.0	48.3	128	-	3
North Dakota	1,512,710	927,354	0	585,356	61.3	0.0	38.7	124	-	2
Ohio	624,474,748	624,474,748	0	0	100.0	0.0	0.0	140	-	-
Oklahoma	367,832,225	339,261,773	28,516,003	54,449	92.2	7.8	0.0	157	17	2

TABLE A4.2

CAPITATED PAYMENTS IN 2002, BY TYPE OF PLAN

	Total Capitated Payments	Capitated Payments, by Type of Plan			Percentage of Total			Capitated Payments per Person per Month		
		HMO/HIO	PHP	PCCM	HMO/HIO	PHP	PCCM	HMO/HIO	PHP	PCCM
Oregon	893,618,174	652,987,699	239,846,845	783,630	73.1	26.8	0.1	202	52	5
Pennsylvania	3,815,086,030	2,794,939,114	1,018,504,560	1,642,356	73.3	26.7	0.0	242	102	1
Rhode Island	183,634,479	183,634,479	0	0	100.0	0.0	0.0	124	-	-
South Carolina	60,789,391	44,472,621	16,316,770	0	73.2	26.8	0.0	80	72	-
South Dakota	8,336,251	0	6,894,262	1,441,989	0.0	82.7	17.3	-	6	2
Tennessee	1,729,513,023	1,369,987,309	359,525,714	0	79.2	20.8	0.0	158	21	-
Texas	1,254,164,114	1,209,584,184	34,911,447	9,668,483	96.4	2.8	0.8	180	13	3
Utah	193,290,118	131,798,275	61,491,843	0	68.2	31.8	0.0	136	35	-
Vermont	4,688,485	0	0	4,688,485	0.0	0.0	100.0	-	-	5
Virginia	637,053,483	634,563,870	0	2,489,613	99.6	0.0	0.4	220	-	3
Washington	668,069,796	667,948,374	0	121,422	100.0	0.0	0.0	128	-	2
West Virginia	56,480,357	53,379,219	0	3,101,138	94.5	0.0	5.5	93	-	3
Wisconsin	1,039,584,128	655,506,744	384,077,384	0	63.1	36.9	0.0	179	2,404	-
Wyoming	0	0	0	0	-	-	-	-	-	-

SOURCE: Medicaid Analytic Extract 2002 Person Summary File.

- = not applicable; HMO/HIO = health maintenance organization or health insuring organization; PCCM = primary care case management; PHP = prepaid health plan.

TABLE A4.3

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG PEOPLE EVER ENROLLED IN COMPREHENSIVE MANAGED CARE PLANS (HMOs/HIOs) IN 2002, BY TYPE OF SERVICE

	Total FFS Expenditures					FFS Expenditures per Enrollee				
	Total	IP	ILTC	Rx	Other	Total	IP	ILTC	Rx	Other
United States	**18,577,811,963**	**3,582,593,112**	**2,785,492,611**	**2,680,819,888**	**9,528,906,352**	**911**	**176**	**137**	**131**	**467**
Alabama	20,070,858	139,710	8,279,108	5,496,876	6,155,164	4,574	32	1,887	1,253	1,403
Alaska	-	-	-	-	-	-	-	-	-	-
Arizona**	35,875,981	8,588,836	375,412	146,819	26,764,914	38	9	0	0	29
Arkansas	-	-	-	-	-	-	-	-	-	-
California*	2,672,839,193	593,689,559	216,358,496	185,093,570	1,677,697,568	682	151	55	47	428
Colorado**	285,807,146	48,761,266	43,531,545	14,043,505	179,470,830	1,215	207	185	60	763
Connecticut**	99,939,337	19,932,078	2,194,575	5,374,312	72,438,372	285	57	6	15	207
Delaware**	155,394,388	7,140,778	3,198,771	62,773,391	82,281,448	1,298	60	27	524	687
District of Columbia**	68,302,321	24,733,579	1,538,680	1,960,960	40,069,102	657	238	15	19	386
Florida*	653,441,443	188,660,311	25,618,725	74,796,499	364,365,908	676	195	26	77	377
Georgia	-	-	-	-	-	-	-	-	-	-
Hawaii**	35,882,150	10,820,983	504,679	2,849,250	21,707,238	224	68	3	18	136
Idaho	-	-	-	-	-	-	-	-	-	-
Illinois	117,912,650	60,818,447	1,398,019	6,570,552	49,125,632	652	336	8	36	272
Indiana*	226,010,791	49,011,799	4,256,613	19,131,153	153,611,226	713	155	13	60	485
Iowa*	67,017,841	11,328,416	1,711,600	19,761,367	34,216,458	707	120	18	208	361
Kansas*	350,365,547	30,763,679	133,863,687	46,105,055	139,633,126	2,864	251	1,094	377	1,141
Kentucky	158,169,844	15,054,226	31,135,651	24,582,800	87,397,167	1,054	100	207	164	582
Louisiana	-	-	-	-	-	-	-	-	-	-
Maine	-	-	-	-	-	-	-	-	-	-
Maryland**	936,349,395	208,318,892	41,104,964	100,446,577	586,478,962	1,611	359	71	173	1,009
Massachusetts*	335,041,863	81,071,566	9,643,815	32,418,101	211,908,381	908	220	26	88	574
Michigan**	535,355,217	128,147,598	13,740,742	135,767,812	257,699,065	519	124	13	132	250
Minnesota**	972,000,901	57,771,103	640,170,587	21,964,838	252,094,373	2,088	124	1,375	47	542
Mississippi	-	-	-	-	-	-	-	-	-	-
Missouri*	201,609,381	51,930,072	3,275,442	15,195,807	131,208,060	396	102	6	30	258
Montana	-	-	-	-	-	-	-	-	-	-
Nebraska	57,857,860	10,162,853	4,862,041	19,497,031	23,335,935	1,333	234	112	449	537
Nevada*	41,896,009	13,194,298	1,024,812	2,258,676	25,418,223	394	124	10	21	239
New Hampshire	15,508,691	550,873	51,824	3,575,679	11,330,315	1,118	40	4	258	817
New Jersey**	538,433,734	84,752,983	17,998,678	48,200,957	387,481,116	777	122	26	70	559
New Mexico**	229,892,520	27,316,243	8,020,602	5,002,162	189,553,513	724	86	25	16	597
New York*	2,385,493,228	719,084,364	50,875,524	559,814,332	1,055,719,008	1,418	428	30	333	628
North Carolina	46,574,835	6,359,822	544,618	10,436,515	29,233,880	1,351	184	16	303	848
North Dakota	698,845	104,270	0	250,418	344,157	593	89	0	213	292
Ohio*	275,765,864	79,976,326	1,249,266	21,556,500	172,983,772	515	149	2	40	323

TABLE A4.3

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG PEOPLE EVER ENROLLED IN COMPREHENSIVE MANAGED CARE PLANS (HMOs/HIOs) IN 2002, BY TYPE OF SERVICE

	Total FFS Expenditures					FFS Expenditures per Enrollee				
	Total	IP	ILTC	Rx	Other	Total	IP	ILTC	Rx	Other
Oklahoma*	106,929,450	37,179,688	8,396,011	11,911,549	49,442,202	339	118	27	38	157
Oregon**	527,537,385	37,039,064	92,139,377	95,027,851	303,331,093	1,229	86	215	221	707
Pennsylvania**	754,638,606	136,153,883	299,128,186	56,123,293	263,233,244	627	113	248	47	219
Rhode Island**	192,557,597	34,817,806	9,992,640	14,744,289	133,002,862	1,264	229	66	97	873
South Carolina	61,534,595	10,115,732	1,806,743	4,535,482	45,076,638	922	152	27	68	675
South Dakota	-	-	-	-	-	-	-	-	-	-
Tennessee**	3,492,507,748	334,716,202	1,069,937,917	599,373,697	1,488,479,932	2,253	216	690	387	960
Texas*	945,133,688	254,461,658	12,864,528	284,901,094	392,906,408	956	257	13	288	397
Utah**	303,024,604	33,312,958	10,872,252	93,115,188	165,724,206	2,193	241	79	674	1,199
Vermont	-	-	-	-	-	-	-	-	-	-
Virginia**	218,245,124	55,193,464	5,332,807	28,155,569	129,563,284	583	147	14	75	346
Washington**	262,434,013	56,629,095	1,350,232	16,612,381	187,842,305	423	91	2	27	302
West Virginia	63,694,577	5,077,340	4,075,410	19,394,213	35,147,614	827	66	53	252	456
Wisconsin**	130,066,743	49,711,292	3,068,032	11,853,768	65,433,651	309	118	7	28	155
Wyoming	-	-	-	-	-	-	-	-	-	-

SOURCE: Medicaid Analytic Extract 2002 Person Summary File.

**HMO/HIO enrollees represent more than 50 percent of all enrollees in this state.

*HMO/HIO enrollees represent more than 25 percent of all enrollees in this state.

- = not applicable; HMO/HIO = health maintenance organization or health insuring organization; IP = inpatient; ILTC = institutional long-term care; Rx = prescription drug; Other = all services other than IP, ILTC, and Rx.

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Also see Table A3.9 for percentage of enrollees who are duals and tables A6.9-A6.16 for utilization and expenditures by detailed type of service.

TABLE A5.1

ENROLLMENT CHARACTERISTICS OF DUAL ENROLLEES IN 2002

	Total Number of Dual Enrollees	Number of Dual Enrollees by:				Percentage of Dual Enrollees by:			
		Benefit Status		Basis of Eligibility		Benefit Status		Basis of Eligibility	
		Restricted*	Full	Aged	Disabled	Restricted*	Full	Aged	Disabled
United States	8,028,514	928,374	7,100,140	4,555,785	3,370,387	11.6	88.4	56.7	42.0
Alabama	186,202	77,469	108,733	101,099	84,268	41.6	58.4	54.3	45.3
Alaska	11,564	131	11,433	6,091	5,356	1.1	98.9	52.7	46.3
Arizona	103,266	12,743	90,523	51,637	42,568	12.3	87.7	50.0	41.2
Arkansas	94,752	18,957	75,795	46,027	48,049	20.0	80.0	48.6	50.7
California	1,009,825	11,373	998,452	574,986	423,290	1.1	98.9	56.9	41.9
Colorado	71,944	11,948	59,996	43,767	27,804	16.6	83.4	60.8	38.6
Connecticut	92,449	13,481	78,968	58,520	31,920	14.6	85.4	63.3	34.5
Delaware	18,734	7,190	11,544	10,588	7,050	38.4	61.6	56.5	37.6
District of Columbia	18,827	1,422	17,405	9,375	8,974	7.6	92.4	49.8	47.7
Florida	487,635	87,898	399,737	236,689	248,885	18.0	82.0	48.5	51.0
Georgia	239,133	74,389	164,744	124,671	113,730	31.1	68.9	52.1	47.6
Hawaii	28,102	1,358	26,744	18,769	9,061	4.8	95.2	66.8	32.2
Idaho	22,964	2,707	20,257	12,525	10,334	11.8	88.2	54.5	45.0
Illinois	378,072	18,674	359,398	245,307	128,724	4.9	95.1	64.9	34.0
Indiana	134,833	18,939	115,894	77,138	56,616	14.0	86.0	57.2	42.0
Iowa	69,150	9,267	59,883	38,135	30,620	13.4	86.6	55.1	44.3
Kansas	55,795	6,538	49,257	32,114	23,448	11.7	88.3	57.6	42.0
Kentucky	153,609	39,938	113,671	70,799	82,059	26.0	74.0	46.1	53.4
Louisiana	158,771	45,546	113,225	102,100	56,414	28.7	71.3	64.3	35.5
Maine	91,296	575	90,721	58,991	30,222	0.6	99.4	64.6	33.1
Maryland	103,490	18,799	84,691	55,966	43,122	18.2	81.8	54.1	41.7
Massachusetts	226,168	19,680	206,488	104,147	118,788	8.7	91.3	46.0	52.5
Michigan	224,684	17,574	207,110	101,059	121,535	7.8	92.2	45.0	54.1
Minnesota	131,924	8,863	123,061	86,660	43,595	6.7	93.3	65.7	33.0
Mississippi	149,857	4,599	145,258	76,765	72,576	3.1	96.9	51.2	48.4
Missouri	169,094	13,154	155,940	95,953	70,543	7.8	92.2	56.7	41.7
Montana	18,333	1,053	17,280	9,854	7,512	5.7	94.3	53.8	41.0
Nebraska	38,242	2,066	36,176	22,464	15,614	5.4	94.6	58.7	40.8
Nevada	32,682	12,859	19,823	18,967	13,485	39.3	60.7	58.0	41.3
New Hampshire	22,774	2,383	20,391	12,891	9,035	10.5	89.5	56.6	39.7
New Jersey	187,354	26,670	160,684	101,621	84,529	14.2	85.8	54.2	45.1
New Mexico	44,589	10,098	34,491	22,465	21,706	22.6	77.4	50.4	48.7
New York	622,548	4,881	617,667	347,855	261,164	0.8	99.2	55.9	42.0
North Carolina	283,131	35,069	248,062	176,311	104,456	12.4	87.6	62.3	36.9
North Dakota	15,328	1,577	13,751	9,847	5,402	10.3	89.7	64.2	35.2
Ohio	250,596	30,961	219,635	135,614	111,355	12.4	87.6	54.1	44.4
Oklahoma	99,518	8,584	90,934	62,421	35,733	8.6	91.4	62.7	35.9
Oregon	82,672	9,263	73,409	46,743	33,719	11.2	88.8	56.5	40.8
Pennsylvania	325,144	37,072	288,072	201,042	122,367	11.4	88.6	61.8	37.6
Rhode Island	36,722	3,639	33,083	19,121	16,425	9.9	90.1	52.1	44.7
South Carolina	138,134	11,965	126,169	82,520	54,284	8.7	91.3	59.7	39.3
South Dakota	18,758	4,676	14,082	10,197	8,423	24.9	75.1	54.4	44.9
Tennessee	283,764	7,205	276,559	123,942	149,854	2.5	97.5	43.7	52.8
Texas	521,498	106,127	415,371	379,619	139,818	20.4	79.6	72.8	26.8
Utah	23,517	1,722	21,795	10,979	12,186	7.3	92.7	46.7	51.8
Vermont	30,585	0	30,585	19,236	10,917	0.0	100.0	62.9	35.7
Virginia	148,244	36,360	111,884	88,385	59,262	24.5	75.5	59.6	40.0
Washington	123,511	13,759	109,752	70,192	52,474	11.1	88.9	56.8	42.5
West Virginia	59,881	10,646	49,235	28,855	30,487	17.8	82.2	48.2	50.9
Wisconsin	179,708	3,910	175,798	109,584	66,734	2.2	97.8	61.0	37.1
Wyoming	9,141	2,617	6,524	5,182	3,895	28.6	71.4	56.7	42.6

SOURCE: Medicaid Analytic Extract 2002.

* Received only restricted Medicaid benefits related to Medicare cost sharing in 2002.

Dual = enrolled in both Medicare and Medicaid in at least one month in 2002.

TABLE A5.2

DUAL ENROLLEES BY TYPE IN LAST QUARTER OF ENROLLMENT IN 2002

	Full-Benefit Duals					Restricted-Benefit Duals					
	Total	QMB+	SLMB+	Other Duals	Other/ Unknown	Total	QMB Only	SLMB Only	QI-1	QI-2	QDWI
United States	**6,995,142**	**4,153,885**	**262,026**	**1,954,217**	**625,014**	**1,033,372**	**432,097**	**377,682**	**172,142**	**49,116**	**2,335**
Alabama	105,293	80,961	3,880	11,302	9,150	80,909	39,835	22,300	11,363	7,411	0
Alaska	11,430	7,910	0	2,279	1,241	134	5	129	0	0	0
Arizona	90,249	54,490	0	27,392	8,367	13,017	945	5,655	3,952	2,465	0
Arkansas	71,480	67,013	0	0	4,467	23,272	17,124	2,456	1,165	249	2,278
California	996,078	810,692	75,306	88,578	21,502	13,747	6,442	3,674	2,135	1,495	1
Colorado	59,536	30,068	2	24,061	5,405	12,408	6,395	3,614	1,645	753	1
Connecticut	77,688	45,225	6,189	21,913	4,361	14,761	6,414	3,623	4,724	0	0
Delaware	11,125	6,371	0	3,717	1,037	7,609	4,130	3,467	12	0	0
District of Columbia	17,111	11,985	1,045	2,971	1,110	1,716	98	966	380	272	0
Florida	387,572	301,237	15,513	56,336	14,486	100,063	30,000	45,949	24,114	0	0
Georgia	167,845	3,665	5	139,582	24,593	71,288	40,846	21,052	9,389	0	1
Hawaii	26,517	22,912	0	2,784	821	1,585	111	1,474	0	0	0
Idaho	20,088	10,571	0	6,616	2,901	2,876	2,876	0	0	0	0
Illinois	355,225	128,233	17,605	61,623	147,764	22,847	10,019	2,130	10,698	0	0
Indiana	113,816	61,977	16,109	32,509	3,221	21,017	8,274	6,139	3,605	2,996	3
Iowa	58,281	28,947	6,859	19,639	2,836	10,869	4,555	3,543	1,798	973	0
Kansas	47,381	26,567	487	16,293	4,034	8,414	4,873	2,525	982	34	0
Kentucky	111,596	74,541	4,554	26,089	6,412	42,013	28,080	8,250	4,169	1,514	0
Louisiana	110,729	106,840	114	75	3,700	48,042	24,819	12,673	6,284	4,266	0
Maine	89,880	29,510	5,540	47,990	6,840	1,416	547	356	296	183	34
Maryland	80,411	44,000	0	14,027	22,384	23,079	14,166	5,567	2,055	1,291	0
Massachusetts	205,587	90,911	0	101,866	12,810	20,581	187	14,150	3,068	3,176	0
Michigan	202,786	46,158	6,340	130,594	19,694	21,898	1,662	11,124	5,115	3,994	3
Minnesota	121,768	59,384	10,822	30,258	21,304	10,156	2,035	5,750	2,371	0	0
Mississippi	144,433	141,063	0	0	3,370	5,424	666	1,738	0	3,020	0
Missouri	154,562	59,760	8,894	83,240	2,668	14,532	8,414	5,265	318	535	0
Montana	17,288	10,523	1,688	4,474	603	1,045	439	606	0	0	0
Nebraska	35,908	22,736	0	12,417	755	2,334	0	2,333	0	0	1
Nevada	19,200	18,094	0	0	1,106	13,482	7,477	6,005	0	0	0
New Hampshire	19,662	6,772	881	11,258	751	3,112	1,725	995	391	0	1
New Jersey	158,595	123,339	0	13,422	21,834	28,759	0	20,240	8,519	0	0
New Mexico	34,259	26,734	0	3,861	3,664	10,330	10,330	0	0	0	0

TABLE A5.2

DUAL ENROLLEES BY TYPE IN LAST QUARTER OF ENROLLMENT IN 2002

	Full-Benefit Duals					Restricted-Benefit Duals					
	Total	QMB+	SLMB+	Other Duals	Other/ Unknown	Total	QMB Only	SLMB Only	QI-1	QI-2	QDWI
New York	617,943	226,819	3,722	370,726	16,676	4,605	2,606	795	998	206	0
North Carolina	242,933	191,903	5,620	33,941	11,469	40,198	713	27,985	11,500	0	0
North Dakota	13,437	1,442	354	11,431	210	1,891	823	690	304	74	0
Ohio	207,156	122,242	14	56,274	28,626	43,440	22,752	10,846	5,269	4,573	0
Oklahoma	90,209	86,883	1,269	0	2,057	9,309	0	8,741	551	17	0
Oregon	68,803	29,704	5,497	27,257	6,345	13,869	5,208	4,899	2,765	997	0
Pennsylvania	285,852	207,683	15,211	45,148	17,810	39,292	778	21,581	12,127	4,806	0
Rhode Island	32,979	17,430	0	12,997	2,552	3,743	375	1,601	1,037	730	0
South Carolina	125,701	75,791	0	40,267	9,643	12,433	0	9,044	3,019	370	0
South Dakota	14,118	8,857	937	1,929	2,395	4,640	2,518	1,358	598	166	0
Tennessee	269,269	85,402	21,978	155,059	6,830	14,495	8,523	5,972	0	0	0
Texas	410,107	276,833	10,711	71,675	50,888	111,391	60,344	34,439	16,608	0	0
Utah	21,361	12,832	1,113	5,812	1,604	2,156	278	1,176	506	196	0
Vermont	29,885	9,870	1,609	5,317	13,089	700	174	526	0	0	0
Virginia	109,604	85,881	0	20,206	3,517	38,640	19,358	13,056	4,094	2,120	12
Washington	105,413	77,621	1,910	18,567	7,315	18,098	8,578	6,461	3,059	0	0
West Virginia	48,561	0	0	42,230	6,331	11,320	11,320	0	0	0	0
Wisconsin	171,962	74,735	6,808	38,213	52,206	7,746	2,751	4,087	807	101	0
Wyoming	6,470	2,768	3,440	2	260	2,671	1,509	677	352	133	0

SOURCE: Medicaid Analytic Extract 2002.

NOTE: Duals enrolled in Pharmacy Plus programs, which cover only prescription drugs, are included as Other among full-benefit FFS enrollees in Florida, Illinois, Vermont, and Wisconsin. This may lead to overestimates of full-benefit enrollees in these states.

Dual = enrolled in both Medicare and Medicaid in at least one month in 2002; QDWI = qualified disabled and working individual with income between 175 and 200 percent of the FPL and eligible for Medicare Part A; QI-1 = qualifying individual with income between 120 and 135 percent of the FPL; QI-2 = qualifying individual with income between 135 and 175 percent of the FPL; QMB = qualified Medicare beneficiary with income below 100 percent of the federal poverty level (FPL); SLMB = specified low-income Medicare beneficiary with income between 100 and 120 percent of the FPL.

TABLE A5.3

ORIGINAL REASON FOR MEDICARE ENTITLEMENT AMONG FEE-FOR-SERVICE (FFS) DUALS IN 2002

	Total Number of FFS Dual Enrollees	FFS Duals as a Percentage of All Duals	FFS Duals as a Percentage of Full-Benefit Duals	Number of FFS Dual Enrollees, by Original Reason for Medicare Entitlement			Percentage of FFS Dual Enrollees, by Original Reason for Medicare Entitlement		
				Aged	Disabled	ESRD	Aged	Disabled	ESRD
United States	6,195,510	77.2	87.3	3,470,201	2,632,775	92,534	56.0	42.5	1.5
Alabama	104,395	56.1	96.0	51,886	50,750	1,759	49.7	48.6	0.9
Alaska	11,433	98.9	100.0	5,550	5,731	152	48.5	50.1	0.5
Arizona	32,012	31.0	35.4	20,420	10,913	679	63.8	34.1	1.1
Arkansas	75,795	80.0	100.0	38,126	36,650	1,019	50.3	48.4	0.6
California	846,520	83.8	84.8	545,560	289,993	10,967	64.4	34.3	0.6
Colorado	47,902	66.6	79.8	26,465	20,799	638	55.2	43.4	0.5
Connecticut	78,375	84.8	99.2	40,316	37,158	901	51.4	47.4	0.4
Delaware	9,641	51.5	83.5	4,678	4,772	191	48.5	49.5	0.9
District of Columbia	17,071	90.7	98.1	9,253	7,192	626	54.2	42.1	1.9
Florida	364,633	74.8	91.2	214,880	143,712	6,041	58.9	39.4	0.7
Georgia	164,744	68.9	100.0	82,059	78,555	4,130	49.8	47.7	1.2
Hawaii	26,100	92.9	97.6	16,714	8,915	471	64.0	34.2	0.9
Idaho	20,257	88.2	100.0	9,143	10,824	290	45.1	53.4	0.6
Illinois	359,316	95.0	100.0	233,921	120,850	4,545	65.1	33.6	0.6
Indiana	115,357	85.6	99.5	55,228	57,748	2,381	47.9	50.1	0.7
Iowa	59,798	86.5	99.9	27,471	31,664	663	45.9	53.0	0.4
Kansas	34,185	61.3	69.4	14,944	18,760	481	43.7	54.9	0.6
Kentucky	99,283	64.6	87.3	49,306	48,982	995	49.7	49.3	0.4
Louisiana	113,225	71.3	100.0	58,823	51,509	2,893	52.0	45.5	1.3
Maine	90,721	99.4	100.0	52,364	37,948	409	57.7	41.8	0.2
Maryland	78,870	76.2	93.1	45,702	31,781	1,387	57.9	40.3	0.9
Massachusetts	203,530	90.0	98.6	95,113	106,792	1,625	46.7	52.5	0.3
Michigan	191,766	85.3	92.6	92,561	96,209	2,996	48.3	50.2	0.7
Minnesota	79,086	59.9	64.3	33,876	44,168	1,042	42.8	55.8	0.5
Mississippi	145,258	96.9	100.0	71,076	71,644	2,538	48.9	49.3	0.6
Missouri	154,725	91.5	99.2	70,790	81,254	2,681	45.8	52.5	0.6
Montana	17,280	94.3	100.0	8,081	8,946	253	46.8	51.8	0.6
Nebraska	35,835	93.7	99.1	17,291	18,043	501	48.3	50.4	0.5
Nevada	19,687	60.2	99.3	11,000	8,356	331	55.9	42.4	0.9
New Hampshire	20,345	89.3	99.8	9,353	10,852	140	46.0	53.3	0.2
New Jersey	149,556	79.8	93.1	89,427	58,059	2,070	59.8	38.8	0.6
New Mexico	31,480	70.6	91.3	18,296	12,548	636	58.1	39.9	1.1
New York	596,549	95.8	96.6	361,291	227,767	7,491	60.6	38.2	0.6
North Carolina	247,829	87.5	99.9	123,367	119,909	4,553	49.8	48.4	0.6
North Dakota	13,751	89.7	100.0	7,285	6,316	150	53.0	45.9	0.3
Ohio	217,721	86.9	99.1	104,179	109,625	3,917	47.8	50.4	0.8
Oklahoma	88,509	88.9	97.3	47,202	40,000	1,307	53.3	45.2	0.6
Oregon	41,980	50.8	57.2	21,141	20,172	667	50.4	48.1	0.6
Pennsylvania	141,195	43.4	49.0	87,625	52,608	962	62.1	37.3	0.3
Rhode Island	30,644	83.4	92.6	16,720	13,704	220	54.6	44.7	0.3
South Carolina	125,997	91.2	99.9	59,968	63,387	2,642	47.6	50.3	0.8
South Dakota	14,082	75.1	100.0	7,690	6,203	189	54.6	44.0	0.7
Tennessee	9,265	3.3	3.4	5,834	3,296	135	63.0	35.6	0.5
Texas	381,467	73.1	91.8	244,677	129,132	7,658	64.1	33.9	1.1
Utah	10,566	44.9	48.5	5,249	5,140	177	49.7	48.6	0.7
Vermont	30,585	100.0	100.0	17,419	13,007	159	57.0	42.5	0.2
Virginia	107,766	72.7	96.3	55,669	50,009	2,088	51.7	46.4	0.8
Washington	109,017	88.3	99.3	52,473	55,036	1,508	48.1	50.5	0.6
West Virginia	49,125	82.0	99.8	21,625	26,848	652	44.0	54.7	0.6
Wisconsin	174,757	97.2	99.4	108,182	65,029	1,546	61.9	37.2	0.3
Wyoming	6,524	71.4	100.0	2,932	3,510	82	44.9	53.8	0.6

SOURCE: Medicaid Analytic Extract 2002.

NOTE: Duals enrolled in Pharmacy Plus programs, which cover only prescription drugs, are included among full-benefit FFS enrollees in Florida, Illinois, Vermont, and Wisconsin. This may lead to overestimates of total FFS enrollees in these states.

Dual = enrolled in both Medicare and Medicaid in at least one month in 2002; ESRD = end-stage renal disease;
FFS duals = full-benefit dual enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002.

TABLE A5.4

JUNE 2002 MEDICARE PART A AND PART B ENROLLMENT AMONG FEE-FOR-SERVICE (FFS) DUALS

	Number of FFS Duals Enrolled in June 2002	Number Enrolled in:			Percentage Enrolled in:		
		Part A and B	Part A Only	Part B Only	Part A and B	Part A Only	Part B Only
United States	**5,803,342**	**5,398,577**	**81,947**	**322,818**	**93.0**	**1.4**	**5.6**
Alabama	97,250	92,819	579	3,852	95.4	0.6	4.0
Alaska	10,790	10,577	144	69	98.0	1.3	0.6
Arizona	29,056	27,258	451	1,347	93.8	1.6	4.6
Arkansas	70,474	69,289	936	249	98.3	1.3	0.4
California	800,438	685,434	5,066	109,938	85.6	0.6	13.7
Colorado	44,725	41,445	334	2,946	92.7	0.7	6.6
Connecticut	72,902	70,456	1,297	1,149	96.6	1.8	1.6
Delaware	9,092	8,890	81	121	97.8	0.9	1.3
District of Columbia	16,019	15,316	346	357	95.6	2.2	2.2
Florida	341,768	330,501	3,140	8,127	96.7	0.9	2.4
Georgia	152,228	143,300	2,175	6,753	94.1	1.4	4.4
Hawaii	24,775	23,989	444	342	96.8	1.8	1.4
Idaho	18,748	18,448	250	50	98.4	1.3	0.3
Illinois	340,863	314,554	6,876	19,433	92.3	2.0	5.7
Indiana	106,205	103,615	1,847	743	97.6	1.7	0.7
Iowa	55,573	54,894	434	245	98.8	0.8	0.4
Kansas	31,349	29,708	613	1,028	94.8	2.0	3.3
Kentucky	91,640	87,211	1,070	3,359	95.2	1.2	3.7
Louisiana	104,995	99,406	1,187	4,402	94.7	1.1	4.2
Maine	85,924	82,198	2,911	815	95.7	3.4	0.9
Maryland	74,461	73,149	913	399	98.2	1.2	0.5
Massachusetts	190,781	186,435	2,938	1,408	97.7	1.5	0.7
Michigan	181,608	179,479	1,419	710	98.8	0.8	0.4
Minnesota	73,727	71,975	1,589	163	97.6	2.2	0.2
Mississippi	137,123	135,484	1,219	420	98.8	0.9	0.3
Missouri	143,702	135,344	4,588	3,770	94.2	3.2	2.6
Montana	16,086	15,755	228	103	97.9	1.4	0.6
Nebraska	33,458	32,723	386	349	97.8	1.2	1.0
Nevada	18,112	16,781	351	980	92.7	1.9	5.4
New Hampshire	18,839	17,674	1,019	146	93.8	5.4	0.8
New Jersey	140,707	126,051	1,015	13,641	89.6	0.7	9.7
New Mexico	29,973	27,187	210	2,576	90.7	0.7	8.6
New York	561,441	441,986	11,556	107,899	78.7	2.1	19.2
North Carolina	231,200	228,358	1,916	926	98.8	0.8	0.4
North Dakota	12,809	12,145	334	330	94.8	2.6	2.6
Ohio	200,894	190,622	7,612	2,660	94.9	3.8	1.3
Oklahoma	82,908	81,547	1,161	200	98.4	1.4	0.2
Oregon	39,020	36,873	414	1,733	94.5	1.1	4.4
Pennsylvania	128,426	126,278	1,753	395	98.3	1.4	0.3
Rhode Island	28,627	25,964	519	2,144	90.7	1.8	7.5
South Carolina	118,450	114,474	917	3,059	96.6	0.8	2.6
South Dakota	13,011	12,719	144	148	97.8	1.1	1.1
Tennessee	8,820	8,412	371	37	95.4	4.2	0.4
Texas	355,639	349,951	2,893	2,795	98.4	0.8	0.8
Utah	9,570	9,067	301	202	94.7	3.1	2.1
Vermont	28,962	28,152	540	270	97.2	1.9	0.9
Virginia	101,007	95,674	1,047	4,286	94.7	1.0	4.2
Washington	101,579	94,662	1,661	5,256	93.2	1.6	5.2
West Virginia	45,540	44,618	823	99	98.0	1.8	0.2
Wisconsin	166,041	163,777	1,885	379	98.6	1.1	0.2
Wyoming	6,007	5,953	44	10	99.1	0.7	0.2

SOURCE: Medicaid Analytic Extract 2002.

NOTE: Duals enrolled in Pharmacy Plus programs, which cover only prescription drugs, are included among full-benefit FFS enrollees in Florida, Illinois, Vermont, and Wisconsin. This may lead to overestimates of total FFS enrollees in these states.

Dual = enrolled in both Medicare and Medicaid in at least one month in 2002; FFS duals = full-benefit dual enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002.

TABLE A5.5

MEDICAID MANAGED CARE ENROLLMENT AMONG DUAL ENROLLEES IN 2002

	Number of Dual Enrollees			Percentage of Dual Enrollees		
	Ever Enrolled in HMO/HIO	Ever Enrolled in PHP Only or PHP/PCCM Only	Ever Enrolled in PCCM Only	Ever Enrolled in HMO/HIO	Ever Enrolled in PHP Only or PHP/ PCCM Only	Ever Enrolled in PCCM Only
United States	**904,630**	**1,567,211**	**127,027**	**11.3**	**19.5**	**1.6**
Alabama	4,338	20,124	1,607	2.3	10.8	0.9
Alaska	0	0	0	0.0	0.0	0.0
Arizona	58,511	25,417	0	56.7	24.6	0.0
Arkansas	0	0	2,698	0.0	0.0	2.8
California	151,932	846,364	0	15.0	83.8	0.0
Colorado	12,094	47,219	197	16.8	65.6	0.3
Connecticut	593	0	0	0.6	0.0	0.0
Delaware	1,903	8,476	0	10.2	45.2	0.0
District of Columbia	334	0	0	1.8	0.0	0.0
Florida	35,104	1,315	15,212	7.2	0.3	3.1
Georgia	0	0	16,776	0.0	0.0	7.0
Hawaii	644	203	0	2.3	0.7	0.0
Idaho	0	0	7,874	0.0	0.0	34.3
Illinois	82	215	0	0.0	0.1	0.0
Indiana	537	0	807	0.4	0.0	0.6
Iowa	85	24,457	0	0.1	35.4	0.0
Kansas	15,072	17	18,188	27.0	0.0	32.6
Kentucky	14,388	95,191	123	9.4	62.0	0.1
Louisiana	0	0	2,485	0.0	0.0	1.6
Maine	0	0	696	0.0	0.0	0.8
Maryland	5,821	0	0	5.6	0.0	0.0
Massachusetts	2,958	11,399	2,655	1.3	5.0	1.2
Michigan	15,344	209,340	0	6.8	93.2	0.0
Minnesota	43,975	0	0	33.3	0.0	0.0
Mississippi	0	0	344	0.0	0.0	0.2
Missouri	1,215	0	0	0.7	0.0	0.0
Montana	0	0	732	0.0	0.0	4.0
Nebraska	341	1,358	0	0.9	3.6	0.0
Nevada	136	0	0	0.4	0.0	0.0
New Hampshire	46	12	0	0.2	0.1	0.0
New Jersey	11,128	37,915	0	5.9	20.2	0.0
New Mexico	3,011	0	0	6.8	0.0	0.0
New York	21,118	6,436	1,638	3.4	1.0	0.3
North Carolina	233	0	48,593	0.1	0.0	17.2
North Dakota	0	0	73	0.0	0.0	0.5
Ohio	1,914	0	0	0.8	0.0	0.0
Oklahoma	2,425	2,006	8	2.4	2.0	0.0
Oregon	31,429	31,222	92	38.0	37.8	0.1
Pennsylvania	146,877	506	305	45.2	0.2	0.1
Rhode Island	2,439	0	0	6.6	0.0	0.0
South Carolina	172	653	0	0.1	0.5	0.0
South Dakota	0	18,758	0	0.0	100.0	0.0
Tennessee	267,294	9,293	0	94.2	3.3	0.0
Texas	33,904	25,829	597	6.5	5.0	0.1
Utah	11,229	9,390	0	47.7	39.9	0.0
Vermont	0	0	1,947	0.0	0.0	6.4
Virginia	4,118	0	1,621	2.8	0.0	1.1
Washington	735	122,773	0	0.6	99.4	0.0
West Virginia	110	0	1,759	0.2	0.0	2.9
Wisconsin	1,041	11,323	0	0.6	6.3	0.0
Wyoming	0	0	0	0.0	0.0	0.0

SOURCE: Medicaid Analytic Extract 2002.

NOTE: In Kansas, the reported number of duals enrolled in Medicaid managed care was larger than expected. This and other unusual MAX data findings have been documented in the MAX anomaly reports, which are available on the MAX website at the following link: http://www.cms.hhs. gov/MedicaidDataSourcesGenInfo/ 07_MAXGeneralInformation.asp.

Dual = enrolled in both Medicare and Medicaid in at least one month in 2002; HMO/HIO = health maintenance organization or health insuring organization; PCCM = primary care case management; PHP = prepaid health plan.

TABLE A5.6

MEDICAID FEE-FOR-SERVICE (FFS) UTILIZATION AND EXPENDITURES AMONG FFS DUALS IN 2002

	Total Number of Enrollees	Number Who Died in Past Year	Total PYE	Percentage Using Services	Expenditures				
					Total	Per Enrollee	Per PYE	Per User	As Percentage of FFS $ for All FFS Enrollees
United States	**6,195,510**	**717,989**	**5,352,943**	**89.8**	**81,576,722,820**	**13,167**	**15,240**	**14,669**	**52.2**
Alabama	104,395	16,697	94,002	94.4	1,306,514,270	12,515	13,899	13,254	54.1
Alaska	11,433	628	9,884	93.9	196,107,589	17,153	19,841	18,260	26.3
Arizona**	32,012	16,758	25,441	19.0	51,762,633	1,617	2,035	8,522	12.7
Arkansas	75,795	8,991	64,476	92.2	854,234,019	11,270	13,249	12,226	42.0
California	846,520	60,391	773,137	90.9	7,651,440,263	9,039	9,897	9,944	52.4
Colorado	47,902	8,175	41,470	93.9	791,439,485	16,522	19,085	17,595	60.2
Connecticut	78,375	9,522	69,031	96.6	1,995,203,922	25,457	28,903	26,341	75.8
Delaware	9,641	2,081	8,526	95.9	245,471,483	25,461	28,791	26,546	81.2
District of Columbia	17,071	1,507	15,224	88.2	282,780,315	16,565	18,574	18,776	42.0
Florida	364,633	43,388	314,141	89.7	3,798,920,696	10,418	12,093	11,621	50.5
Georgia	164,744	23,152	138,841	92.4	1,604,003,925	9,736	11,553	10,538	34.4
Hawaii	26,100	1,962	21,555	94.5	280,545,501	10,749	13,015	11,379	67.4
Idaho	20,257	2,368	17,325	95.7	342,042,238	16,885	19,742	17,651	42.0
Illinois	359,316	24,483	263,780	58.4	3,030,065,279	8,433	11,487	14,435	39.4
Indiana	115,357	15,185	98,339	92.8	1,787,922,414	15,499	18,181	16,707	55.6
Iowa	59,798	7,185	52,605	96.7	899,906,095	15,049	17,107	15,557	56.2
Kansas*	34,185	6,028	29,300	95.9	566,574,654	16,574	19,337	17,285	52.1
Kentucky	99,283	15,815	86,553	95.6	1,194,920,733	12,036	13,806	12,593	41.1
Louisiana	113,225	14,861	101,854	94.0	1,273,600,910	11,248	12,504	11,965	38.3
Maine	90,721	5,703	84,114	82.2	680,463,165	7,501	8,090	9,130	37.9
Maryland	78,870	9,787	63,133	79.9	1,272,457,620	16,134	20,155	20,194	73.8
Massachusetts	203,530	18,287	184,328	94.3	3,250,240,541	15,969	17,633	16,928	60.7
Michigan	191,766	21,485	168,913	93.3	1,740,551,594	9,076	10,304	9,731	73.2
Minnesota*	79,086	14,259	54,932	72.6	1,292,600,096	16,344	23,531	22,506	52.5
Mississippi	145,258	10,532	132,899	95.7	1,113,806,573	7,668	8,381	8,009	45.6
Missouri	154,725	15,798	132,407	94.3	1,869,746,319	12,084	14,121	12,811	56.5
Montana	17,280	1,897	13,794	95.9	215,970,433	12,498	15,657	13,026	42.6
Nebraska	35,835	3,827	30,950	97.0	560,206,914	15,633	18,100	16,116	51.3
Nevada	19,687	3,184	16,658	92.5	223,446,604	11,350	13,414	12,277	38.3
New Hampshire	20,345	2,509	16,835	96.3	419,653,713	20,627	24,928	21,419	57.8
New Jersey	149,556	19,049	131,909	94.5	2,764,099,009	18,482	20,955	19,566	68.2
New Mexico	31,480	3,755	28,398	92.9	493,723,536	15,684	17,386	16,891	72.7
New York	596,549	48,323	536,137	92.5	14,278,261,315	23,935	26,632	25,884	54.7
North Carolina	247,829	24,532	221,772	95.9	2,692,205,155	10,863	12,140	11,324	44.2
North Dakota	13,751	1,783	11,617	94.2	261,828,727	19,041	22,539	20,222	61.7
Ohio	217,721	28,120	181,130	96.8	4,565,140,505	20,968	25,204	21,654	53.1
Oklahoma	88,509	10,248	73,817	92.3	923,811,278	10,437	12,515	11,305	57.0
Oregon*	41,980	9,372	35,148	94.7	479,976,955	11,433	13,656	12,076	60.3
Pennsylvania**	141,195	52,803	116,704	94.1	3,036,171,188	21,503	26,016	22,845	73.3
Rhode Island	30,644	3,775	27,398	94.8	612,047,073	19,973	22,339	21,063	70.6
South Carolina	125,997	10,908	115,220	94.7	1,042,175,577	8,271	9,045	8,736	40.1
South Dakota	14,082	2,163	12,300	96.0	221,779,435	15,749	18,030	16,411	44.9
Tennessee**	9,265	14,977	2,791	62.2	15,784,523	1,704	5,656	2,738	21.7
Texas	381,467	50,645	339,480	88.1	4,309,479,929	11,297	12,694	12,825	45.5
Utah**	10,566	3,181	7,867	89.8	165,691,692	15,682	21,061	17,463	42.7
Vermont	30,585	2,055	27,146	93.0	262,039,182	8,568	9,653	9,216	43.0
Virginia	107,766	14,931	94,868	95.1	1,318,134,729	12,231	13,894	12,861	60.5
Washington	109,017	10,977	94,600	94.1	843,924,639	7,741	8,921	8,227	45.9
West Virginia	49,125	5,089	42,099	93.7	630,514,743	12,835	14,977	13,691	43.9
Wisconsin	174,757	13,810	122,516	87.4	1,740,156,082	9,958	14,204	11,399	62.5
Wyoming	6,524	1,048	5,582	94.5	127,177,552	19,494	22,786	20,622	43.8

SOURCE: Medicaid Analytic Extract 2002.

NOTE: Duals enrolled in Pharmacy Plus programs, which cover only prescription drugs, are included among full-benefit FFS enrollees in Florida, Illinois, Vermont, and Wisconsin. This may lead to overestimates of total FFS enrollees and underestimates of per-enrollee expenditures in these states.

**FFS duals represent less than 50 percent of all full-benefit duals in this state; *FFS duals represent less than 75 percent of all full-benefit duals in this state.

Dual = enrolled in both Medicare and Medicaid in at least one month in 2002; FFS duals = full-benefit dual enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; PYE = person-years of enrollment.

TABLE A5.7

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS DUALS IN 2002, BY BASIS OF ELIGIBILITY

	Total Number of Enrollees			Total Expenditures			Expenditures per Enrollee		
	Total	Aged	Disabled	Total	Aged	Disabled	Total	Aged	Disabled
United States	**6,195,510**	**3,531,477**	**2,608,431**	**81,576,722,820**	**45,933,536,043**	**35,383,463,735**	**13,167**	**13,007**	**13,565**
Alabama	104,395	44,209	59,706	1,306,514,270	721,318,361	583,728,368	12,515	16,316	9,777
Alaska	11,433	6,009	5,307	196,107,589	98,441,516	96,580,811	17,153	16,382	18,199
Arizona**	32,012	19,868	11,297	51,762,633	22,833,420	28,087,906	1,617	1,149	2,486
Arkansas	75,795	34,755	40,606	854,234,019	508,565,573	344,140,240	11,270	14,633	8,475
California	846,520	485,655	357,112	7,651,440,263	3,935,293,505	3,699,235,550	9,039	8,103	10,359
Colorado	47,902	31,143	16,596	791,439,485	487,951,528	302,597,654	16,522	15,668	18,233
Connecticut	78,375	48,212	28,652	1,995,203,922	1,226,715,313	761,563,933	25,457	25,444	26,580
Delaware	9,641	5,666	3,783	245,471,483	151,687,870	92,962,070	25,461	26,772	24,574
District of Columbia	17,071	8,351	8,490	282,780,315	162,716,159	116,306,269	16,565	19,485	13,699
Florida	364,633	166,471	196,782	3,798,920,696	1,279,195,920	2,513,833,726	10,418	7,684	12,775
Georgia	164,744	77,791	86,221	1,604,003,925	931,874,891	668,539,878	9,736	11,979	7,754
Hawaii	26,100	17,604	8,467	280,545,501	196,278,903	84,231,086	10,749	11,150	9,948
Idaho	20,257	11,072	9,080	342,042,238	186,116,227	155,295,731	16,885	16,810	17,103
Illinois	359,316	236,179	119,699	3,030,065,279	1,256,946,889	1,754,808,605	8,433	5,322	14,660
Indiana	115,357	68,033	46,550	1,787,922,414	1,027,059,062	756,518,670	15,499	15,096	16,252
Iowa	59,798	31,966	27,495	899,906,095	507,448,708	391,425,142	15,049	15,875	14,236
Kansas*	34,185	18,320	15,707	566,574,654	287,486,623	277,670,654	16,574	15,693	17,678
Kentucky	99,283	43,725	54,910	1,194,920,733	673,844,740	518,047,151	12,036	15,411	9,434
Louisiana	113,225	71,127	41,841	1,273,600,910	786,369,110	485,834,728	11,248	11,056	11,611
Maine	90,721	58,769	29,869	680,463,165	313,651,699	354,587,713	7,501	5,337	11,871
Maryland	78,870	43,915	31,132	1,272,457,620	769,624,791	499,017,952	16,134	17,525	16,029
Massachusetts	203,530	84,876	115,900	3,250,240,541	1,607,912,023	1,634,027,774	15,969	18,944	14,099
Michigan	191,766	90,509	100,273	1,740,551,594	1,223,816,427	514,384,979	9,076	13,521	5,130
Minnesota*	79,086	37,257	40,816	1,292,600,096	283,481,236	1,006,811,773	16,344	7,609	24,667
Mississippi	145,258	73,464	71,278	1,113,806,573	631,047,402	477,826,580	7,668	8,590	6,704
Missouri	154,725	87,528	65,581	1,869,746,319	1,090,755,056	773,359,128	12,084	12,462	11,792
Montana	17,280	9,017	7,296	215,970,433	135,353,448	74,367,393	12,498	15,011	10,193
Nebraska	35,835	20,949	14,738	560,206,914	333,201,269	226,175,225	15,633	15,905	15,346
Nevada	19,687	11,926	7,633	223,446,604	136,931,323	86,042,301	11,350	11,482	11,272
New Hampshire	20,345	11,399	8,141	419,653,713	239,244,921	176,417,958	20,627	20,988	21,670
New Jersey	149,556	80,136	69,316	2,764,099,009	1,425,021,634	1,338,520,837	18,482	17,783	19,310
New Mexico	31,480	15,290	16,079	493,723,536	234,748,739	258,744,094	15,684	15,353	16,092
New York	596,549	334,254	252,086	14,278,261,315	7,891,363,060	6,319,639,538	23,935	23,609	25,069
North Carolina	247,829	152,577	92,924	2,692,205,155	1,721,024,305	959,512,174	10,863	11,280	10,326
North Dakota	13,751	8,728	4,944	261,828,727	166,488,203	95,026,483	19,041	19,075	19,221
Ohio	217,721	125,486	89,657	4,565,140,505	2,860,216,165	1,694,672,904	20,968	22,793	18,902
Oklahoma	88,509	56,801	30,608	923,811,278	570,994,481	349,811,340	10,437	10,053	11,429
Oregon*	41,980	24,405	16,996	479,976,955	300,211,214	176,749,670	11,433	12,301	10,399
Pennsylvania**	141,195	103,836	36,908	3,036,171,188	2,509,769,049	524,536,791	21,503	24,171	14,212
Rhode Island	30,644	16,505	14,121	612,047,073	326,243,531	285,703,862	19,973	19,766	20,233
South Carolina	125,997	75,302	49,658	1,042,175,577	587,096,490	449,966,684	8,271	7,797	9,061
South Dakota	14,082	7,453	6,491	221,779,435	123,025,955	98,115,496	15,749	16,507	15,116
Tennessee**	9,265	6,720	2,222	15,784,523	14,689,955	1,001,528	1,704	2,186	451
Texas	381,467	281,434	98,372	4,309,479,929	3,038,141,959	1,261,220,145	11,297	10,795	12,821
Utah**	10,566	6,051	4,299	165,691,692	94,580,032	70,540,672	15,682	15,630	16,409
Vermont	30,585	19,236	10,917	262,039,182	145,139,912	115,134,901	8,568	7,545	10,546
Virginia	107,766	66,260	41,180	1,318,134,729	780,095,531	536,106,950	12,231	11,773	13,019
Washington	109,017	61,857	46,741	843,924,639	585,269,929	256,780,914	7,741	9,462	5,494
West Virginia	49,125	23,133	25,525	630,514,743	358,369,174	269,897,664	12,835	15,492	10,574
Wisconsin	174,757	106,672	65,545	1,740,156,082	921,565,809	806,724,734	9,958	8,639	12,308
Wyoming	6,524	3,576	2,884	127,177,552	66,317,003	60,629,406	19,494	18,545	21,023

SOURCE: Medicaid Analytic Extract 2002.

NOTE: Duals enrolled in Pharmacy Plus programs, which cover only prescription drugs, are included among full-benefit FFS enrollees in Florida, Illinois, Vermont, and Wisconsin. This may lead to overestimates of total FFS enrollees and underestimates of per-enrollee expenditures in these states.

**FFS duals represent less than 50 percent of all full-benefit duals in this state.

*FFS duals represent less than 75 percent of all full-benefit duals in this state.

Dual = enrolled in both Medicare and Medicaid in at least one month in 2002; FFS duals = full-benefit dual enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002.

TABLE A5.8

MEDICAID FEE-FOR-SERVICE (FFS) UTILIZATION AMONG FFS DUALS IN 2002, BY TYPE OF SERVICE

	Number Using Service				Percentage Using Service			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	1,167,010	1,379,332	5,133,424	5,052,388	18.8	22.3	82.9	81.5
Alabama	25,048	24,561	94,142	90,524	24.0	23.5	90.2	86.7
Alaska	1,565	735	9,980	10,360	13.7	6.4	87.3	90.6
Arizona**	1,603	620	1,363	6,013	5.0	1.9	4.3	18.8
Arkansas	18,184	18,680	62,045	67,261	24.0	24.6	81.9	88.7
California	87,515	98,611	718,233	706,893	10.3	11.6	84.8	83.5
Colorado	8,881	12,912	41,307	42,404	18.5	27.0	86.2	88.5
Connecticut	15,647	28,770	71,311	71,253	20.0	36.7	91.0	90.9
Delaware	1,914	3,406	8,363	8,570	19.9	35.3	86.7	88.9
District of Columbia	4,483	3,581	11,791	13,343	26.3	21.0	69.1	78.2
Florida	85,689	72,668	309,135	286,230	23.5	19.9	84.8	78.5
Georgia	38,925	37,724	143,796	141,387	23.6	22.9	87.3	85.8
Hawaii	1,717	10,987	23,260	23,359	6.6	42.1	89.1	89.5
Idaho	3,705	4,964	18,138	18,236	18.3	24.5	89.5	90.0
Illinois	52,225	69,576	191,433	191,760	14.5	19.4	53.3	53.4
Indiana	26,718	40,884	99,132	101,424	23.2	35.4	85.9	87.9
Iowa	12,042	20,400	54,224	53,333	20.1	34.1	90.7	89.2
Kansas*	7,066	10,193	30,723	29,817	20.7	29.8	89.9	87.2
Kentucky	24,457	23,813	89,788	90,758	24.6	24.0	90.4	91.4
Louisiana	67,641	33,508	100,595	99,092	59.7	29.6	88.8	87.5
Maine	866	8,183	72,626	43,778	1.0	9.0	80.1	48.3
Maryland	14,120	20,177	58,843	55,547	17.9	25.6	74.6	70.4
Massachusetts	37,777	51,554	181,563	177,652	18.6	25.3	89.2	87.3
Michigan	13,587	40,726	169,839	150,896	7.1	21.2	88.6	78.7
Minnesota*	12,196	12,945	52,252	55,060	15.4	16.4	66.1	69.6
Mississippi	38,940	19,714	134,737	134,317	26.8	13.6	92.8	92.5
Missouri	28,954	35,913	138,818	136,589	18.7	23.2	89.7	88.3
Montana	3,416	4,995	15,181	15,514	19.8	28.9	87.9	89.8
Nebraska	7,078	11,097	32,914	32,242	19.8	31.0	91.8	90.0
Nevada	2,781	4,226	16,708	17,237	14.1	21.5	84.9	87.6
New Hampshire	2,635	6,915	18,632	17,550	13.0	34.0	91.6	86.3
New Jersey	32,636	40,650	134,991	127,854	21.8	27.2	90.3	85.5
New Mexico	6,239	6,270	26,516	28,492	19.8	19.9	84.2	90.5
New York	123,982	137,101	452,393	521,621	20.8	23.0	75.8	87.4
North Carolina	63,493	45,208	225,145	229,377	25.6	18.2	90.8	92.6
North Dakota	1,834	5,486	11,495	11,240	13.3	39.9	83.6	81.7
Ohio	54,907	77,664	198,811	203,042	25.2	35.7	91.3	93.3
Oklahoma	20,667	22,888	76,881	72,048	23.4	25.9	86.9	81.4
Oregon*	4,873	6,859	37,805	35,706	11.6	16.3	90.1	85.1
Pennsylvania**	20,820	72,041	124,355	91,252	14.7	51.0	88.1	64.6
Rhode Island	5,630	10,560	27,406	25,719	18.4	34.5	89.4	83.9
South Carolina	23,697	17,859	107,386	109,409	18.8	14.2	85.2	86.8
South Dakota	2,851	5,625	12,211	12,229	20.2	39.9	86.7	86.8
Tennessee**	408	2,085	1,297	4,336	4.4	22.5	14.0	46.8
Texas	87,986	93,840	301,493	318,810	23.1	24.6	79.0	83.6
Utah**	1,414	4,625	8,707	8,528	13.4	43.8	82.4	80.7
Vermont	3,178	3,453	27,481	17,855	10.4	11.3	89.9	58.4
Virginia	25,598	25,614	95,610	95,343	23.8	23.8	88.7	88.5
Washington	11,248	19,169	97,359	94,190	10.3	17.6	89.3	86.4
West Virginia	4,388	10,395	43,941	43,278	8.9	21.2	89.4	88.1
Wisconsin	22,553	36,578	145,554	108,064	12.9	20.9	83.3	61.8
Wyoming	1,233	2,324	5,715	5,596	18.9	35.6	87.6	85.8

SOURCE: Medicaid Analytic Extract 2002.

NOTE: Duals enrolled in Pharmacy Plus programs, which cover only prescription drugs, are included among full-benefit FFS enrollees in Florida, Illinois, Vermont, and Wisconsin. This may lead to overestimates of total FFS enrollees in these states

**FFS duals represent less than 50 percent of full-benefit duals in this state; *FFS duals represent less than 75 percent of full-benefit duals in this state

Dual = enrolled in both Medicare and Medicaid in at least one month in 2002; FFS duals = full-benefit dual enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; IP = inpatient; ILTC = institutional long-term care; Rx = prescription drug; Other = all services other than IP, ILTC, and Rx.

TABLE A5.9

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS DUALS IN 2002, BY TYPE OF SERVICE

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	**2,915,952,202**	**39,835,742,468**	**14,977,711,607**	**23,847,316,543**	**471**	**6,430**	**2,418**	**3,849**	**2,499**	**28,880**	**2,918**	**4,720**
Alabama	33,854,675	680,992,689	218,921,283	372,745,623	324	6,523	2,097	3,571	1,352	27,727	2,325	4,118
Alaska	4,137,585	52,113,751	39,116,952	100,739,301	362	4,558	3,421	8,811	2,644	70,903	3,920	9,724
Arizona**	4,166,314	12,560,327	1,121,857	33,914,135	130	392	35	1,059	2,599	20,259	823	5,640
Arkansas	23,712,155	432,334,791	129,534,222	268,652,851	313	5,704	1,709	3,544	1,304	23,144	2,088	3,994
California	345,730,782	2,572,246,731	2,051,534,065	2,681,928,685	408	3,039	2,423	3,168	3,951	26,085	2,856	3,794
Colorado	16,818,739	341,400,087	130,888,278	302,332,381	351	7,127	2,732	6,311	1,894	26,441	3,169	7,130
Connecticut	34,657,203	1,141,445,748	258,510,913	560,590,058	442	14,564	3,298	7,153	2,215	39,675	3,625	7,868
Delaware	3,109,618	149,125,273	27,397,295	65,839,297	323	15,468	2,842	6,829	1,625	43,783	3,276	7,683
District of Columbia	19,615,619	155,266,141	32,577,163	75,321,392	1,149	9,095	1,908	4,412	4,376	43,358	2,763	5,645
Florida	130,843,059	1,944,813,084	1,013,210,823	710,053,730	359	5,334	2,779	1,947	1,527	26,763	3,278	2,481
Georgia	75,811,331	811,790,657	333,361,219	383,040,718	460	4,928	2,024	2,325	1,948	21,519	2,318	2,709
Hawaii	5,376,395	158,702,224	51,478,582	64,988,300	206	6,081	1,972	2,490	3,131	14,445	2,213	2,782
Idaho	5,474,052	137,266,289	57,928,350	141,373,547	270	6,776	2,860	6,979	1,477	27,652	3,194	7,752
Illinois	198,427,328	1,597,222,463	575,134,882	659,280,606	552	4,445	1,601	1,835	3,799	22,957	3,004	3,438
Indiana	47,120,047	991,336,897	351,381,197	398,084,273	408	8,594	3,046	3,451	1,764	24,248	3,545	3,925
Iowa	18,680,175	489,160,760	162,075,787	229,989,373	312	8,180	2,710	3,846	1,551	23,978	2,989	4,312
Kansas*	16,260,935	216,080,831	99,283,273	234,949,615	476	6,321	2,904	6,873	2,301	21,199	3,232	7,880
Kentucky	40,781,517	582,353,992	294,469,794	277,315,430	411	5,866	2,966	2,793	1,667	24,455	3,280	3,056
Louisiana	81,737,594	698,137,729	306,186,157	187,539,430	722	6,166	2,704	1,656	1,208	20,835	3,044	1,893
Maine	17,082,857	212,626,805	141,050,571	309,702,932	188	2,344	1,555	3,414	19,726	25,984	1,942	7,074
Maryland	54,127,896	699,287,565	177,118,849	341,923,310	686	8,866	2,246	4,335	3,833	34,658	3,010	6,156
Massachusetts	56,662,954	1,614,889,445	533,696,020	1,044,992,122	278	7,934	2,622	5,134	1,500	31,324	2,939	5,882
Michigan	17,293,019	1,062,743,980	462,516,461	197,998,134	90	5,542	2,412	1,032	1,273	26,095	2,723	1,312
Minnesota*	24,156,069	373,120,912	178,723,596	716,599,519	305	4,718	2,260	9,061	1,981	28,824	3,420	13,015
Mississippi	53,862,555	496,596,805	327,959,035	235,388,178	371	3,419	2,258	1,620	1,383	25,190	2,434	1,752
Missouri	42,947,005	726,654,758	493,979,003	606,165,553	278	4,696	3,193	3,918	1,483	20,234	3,558	4,438
Montana	4,982,236	111,154,919	42,797,654	57,035,624	288	6,433	2,477	3,301	1,459	22,253	2,819	3,676
Nebraska	11,552,601	292,784,550	105,953,499	149,916,264	322	8,170	2,957	4,184	1,632	26,384	3,219	4,650
Nevada	9,946,111	101,760,239	44,316,082	67,424,172	505	5,169	2,251	3,425	3,576	24,080	2,652	3,912
New Hampshire	4,033,830	186,346,247	61,951,496	167,322,140	198	9,159	3,045	8,224	1,531	26,948	3,325	9,534
New Jersey	83,776,945	1,447,097,714	479,518,160	753,706,190	560	9,676	3,206	5,040	2,567	35,599	3,552	5,895
New Mexico	12,601,364	157,639,999	64,770,366	258,711,807	400	5,008	2,058	8,218	2,020	25,142	2,443	9,080
New York	777,813,448	6,566,725,007	1,506,607,759	5,427,115,101	1,304	11,008	2,526	9,098	6,274	47,897	3,330	10,404
North Carolina	85,173,340	1,115,498,269	635,573,208	855,960,338	344	4,501	2,565	3,454	1,341	24,675	2,823	3,732
North Dakota	2,989,847	171,903,260	32,892,409	54,043,211	217	12,501	2,392	3,930	1,630	31,335	2,861	4,808
Ohio	112,976,325	2,648,167,718	679,078,453	1,124,918,009	519	12,163	3,119	5,167	2,058	34,098	3,416	5,540
Oklahoma	25,850,683	462,008,140	175,081,862	260,870,593	292	5,220	1,978	2,947	1,251	20,186	2,277	3,621
Oregon*	7,564,046	132,342,320	123,986,728	216,083,861	180	3,153	2,953	5,147	1,552	19,295	3,280	6,052
Pennsylvania**	32,430,750	2,423,004,665	426,999,817	153,735,956	230	17,161	3,024	1,089	1,558	33,634	3,434	1,685
Rhode Island	12,342,216	420,865,586	82,093,755	96,745,516	403	13,734	2,679	3,157	2,192	39,855	2,995	3,762
South Carolina	72,381,740	442,408,871	230,783,078	296,601,888	574	3,511	1,832	2,354	3,054	24,772	2,149	2,711
South Dakota	3,726,982	119,459,209	37,460,350	61,132,894	265	8,483	2,660	4,341	1,307	21,237	3,068	4,999

TABLE A5.9

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS DUALS IN 2002, BY TYPE OF SERVICE

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
Tennessee**	288,666	13,754,010	387,304	1,354,543	31	1,485	42	146	708	6,597	299	312
Texas	140,637,914	2,108,979,719	702,937,193	1,356,925,103	369	5,529	1,843	3,557	1,598	22,474	2,332	4,256
Utah**	3,679,417	109,225,118	28,039,114	24,748,043	348	10,337	2,654	2,342	2,602	23,616	3,220	2,902
Vermont	5,123,259	80,880,068	69,669,738	106,366,117	168	2,644	2,278	3,478	1,612	23,423	2,535	5,957
Virginia	44,862,491	639,344,773	292,625,234	341,302,231	416	5,933	2,715	3,167	1,753	24,961	3,061	3,580
Washington	33,852,845	441,325,032	239,939,640	128,807,122	311	4,048	2,201	1,182	3,010	23,023	2,464	1,368
West Virginia	10,457,735	314,597,660	120,268,107	185,191,241	213	6,404	2,448	3,770	2,383	30,264	2,737	4,279
Wisconsin	42,816,085	919,469,780	326,260,281	451,609,936	245	5,261	1,867	2,584	1,898	25,137	2,242	4,179
Wyoming	1,643,848	58,728,861	18,564,693	48,240,150	252	9,002	2,846	7,394	1,333	25,271	3,248	8,620

SOURCE: Medicaid Analytic Extract 2002.

NOTE: Duals enrolled in Pharmacy Plus programs, which cover only prescription drugs, are included among full-benefit FFS enrollees in Florida, Illinois, Vermont, and Wisconsin. This may lead to overestimates of total FFS enrollees and underestimates of per-enrollee expenditures in these states.

**FFS duals represent less than 50 percent of all full-benefit duals in this state.

*FFS duals represent less than 75 percent of all full-benefit duals in this state.

Dual = enrolled in both Medicare and Medicaid in at least one month in 2002; FFS duals = full-benefit dual enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; IP = inpatient; ILTC = institutional long-term care; Rx = prescription drug; Other = all services other than IP, ILTC, and Rx.

TABLE A5.10

MEDICAID FEE-FOR-SERVICE (FFS) UTILIZATION AMONG FFS DUALS IN 2002, BY TYPE OF SERVICE: AGED

	Number Using Service				Percentage Using Service			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	**641,353**	**1,112,256**	**2,844,835**	**2,703,109**	**18.2**	**31.5**	**80.6**	**76.5**
Alabama	10,465	19,881	40,677	36,567	23.7	45.0	92.0	82.7
Alaska	839	601	5,214	5,414	14.0	10.0	86.8	90.1
Arizona**	756	476	687	2,726	3.8	2.4	3.5	13.7
Arkansas	9,858	15,342	31,200	31,686	28.4	44.1	89.8	91.2
California	45,227	77,062	405,657	389,119	9.3	15.9	83.5	80.1
Colorado	5,951	11,555	27,054	27,344	19.1	37.1	86.9	87.8
Connecticut	9,662	24,968	44,057	43,136	20.0	51.8	91.4	89.5
Delaware	1,221	2,955	4,884	4,943	21.5	52.2	86.2	87.2
District of Columbia	2,143	2,976	4,879	6,312	25.7	35.6	58.4	75.6
Florida	36,507	27,023	137,536	123,906	21.9	16.2	82.6	74.4
Georgia	19,321	32,396	70,021	65,416	24.8	41.6	90.0	84.1
Hawaii	1,029	7,803	15,814	15,600	5.8	44.3	89.8	88.6
Idaho	2,009	4,240	9,990	9,657	18.1	38.3	90.2	87.2
Illinois	21,872	46,139	87,008	82,004	9.3	19.5	36.8	34.7
Indiana	15,021	34,426	59,150	58,008	22.1	50.6	86.9	85.3
Iowa	6,286	17,655	29,635	27,267	19.7	55.2	92.7	85.3
Kansas*	3,753	8,793	16,850	15,114	20.5	48.0	92.0	82.5
Kentucky	11,172	20,255	39,546	38,910	25.6	46.3	90.4	89.0
Louisiana	42,832	26,634	65,402	62,785	60.2	37.4	92.0	88.3
Maine	321	7,232	45,323	20,426	0.5	12.3	77.1	34.8
Maryland	7,473	17,633	32,924	28,506	17.0	40.2	75.0	64.9
Massachusetts	14,664	41,861	75,847	69,432	17.3	49.3	89.4	81.8
Michigan	6,390	36,350	80,042	66,360	7.1	40.2	88.4	73.3
Minnesota*	3,607	8,248	15,486	15,496	9.7	22.1	41.6	41.6
Mississippi	20,863	15,862	68,460	67,373	28.4	21.6	93.2	91.7
Missouri	13,998	31,468	79,049	75,201	16.0	36.0	90.3	85.9
Montana	1,750	4,416	8,054	7,781	19.4	49.0	89.3	86.3
Nebraska	3,895	9,625	19,504	18,114	18.6	45.9	93.1	86.5
Nevada	1,801	3,638	10,324	10,422	15.1	30.5	86.6	87.4
New Hampshire	1,386	6,510	10,573	9,232	12.2	57.1	92.8	81.0
New Jersey	16,356	31,672	72,659	66,070	20.4	39.5	90.7	82.4
New Mexico	3,140	5,256	12,681	13,672	20.5	34.4	82.9	89.4
New York	70,277	111,468	228,748	284,264	21.0	33.3	68.4	85.0
North Carolina	41,076	39,196	140,947	141,039	26.9	25.7	92.4	92.4
North Dakota	1,109	4,774	7,543	6,681	12.7	54.7	86.4	76.5
Ohio	32,323	65,348	116,508	115,986	25.8	52.1	92.8	92.4
Oklahoma	14,164	19,531	50,669	45,677	24.9	34.4	89.2	80.4
Oregon*	2,844	6,127	21,951	20,875	11.7	25.1	89.9	85.5
Pennsylvania**	14,498	66,787	93,029	60,253	14.0	64.3	89.6	58.0
Rhode Island	2,946	8,622	14,817	12,727	17.8	52.2	89.8	77.1
South Carolina	14,094	15,487	62,412	64,145	18.7	20.6	82.9	85.2
South Dakota	1,497	4,860	6,883	6,113	20.1	65.2	92.4	82.0
Tennessee**	251	2,028	888	3,080	3.7	30.2	13.2	45.8
Texas	67,433	78,516	224,239	235,419	24.0	27.9	79.7	83.6
Utah**	764	3,622	5,215	4,831	12.6	59.9	86.2	79.8
Vermont	1,648	3,193	17,294	8,548	8.6	16.6	89.9	44.4
Virginia	16,326	22,275	59,715	57,400	24.6	33.6	90.1	86.6
Washington	6,191	17,239	56,148	52,020	10.0	27.9	90.8	84.1
West Virginia	2,067	9,209	21,123	19,819	8.9	39.8	91.3	85.7
Wisconsin	9,546	30,963	87,274	47,284	8.9	29.0	81.8	44.3
Wyoming	731	2,060	3,245	2,949	20.4	57.6	90.7	82.5

SOURCE: Medicaid Analytic Extract 2002.

NOTE: Duals enrolled in Pharmacy Plus programs, which cover only prescription drugs, are included among full-benefit FFS enrollees in Florida, Illinois, Vermont, and Wisconsin. This may lead to overestimates of total FFS enrollees in these states

**FFS duals represent less than 50 percent of full-benefit duals in this state; *FFS duals represent less than 75 percent of full-benefit duals in this state

Dual = enrolled in both Medicare and Medicaid in at least one month in 2002; FFS duals = full-benefit dual enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; IP = inpatient; ILTC = institutional long-term care; Rx = prescription drug; Other = all services other than IP, ILTC, and Rx.

TABLE A5.11

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS DUALS IN 2002, BY TYPE OF SERVICE: AGED

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	**1,412,803,550**	**28,767,242,759**	**6,831,460,596**	**8,922,029,138**	**400**	**8,146**	**1,934**	**2,526**	**2,203**	**25,864**	**2,401**	**3,301**
Alabama	12,826,113	516,980,168	87,357,838	104,154,242	290	11,694	1,976	2,356	1,226	26,004	2,148	2,848
Alaska	885,565	42,462,008	13,997,277	41,096,666	147	7,066	2,329	6,839	1,056	70,652	2,685	7,591
Arizona**	1,538,101	9,839,529	496,045	10,959,745	77	495	25	552	2,035	20,671	722	4,020
Arkansas	10,395,806	321,744,162	64,305,136	112,120,469	299	9,257	1,850	3,226	1,055	20,971	2,061	3,538
California	171,963,762	1,780,102,100	880,425,097	1,102,802,546	354	3,665	1,813	2,271	3,802	23,100	2,170	2,834
Colorado	10,913,843	296,550,851	69,493,856	110,992,978	350	9,522	2,231	3,564	1,834	25,664	2,569	4,059
Connecticut	20,695,664	889,001,046	129,294,401	187,724,202	429	18,439	2,682	3,894	2,142	35,606	2,935	4,352
Delaware	1,557,725	117,765,263	13,049,945	19,314,937	275	20,785	2,303	3,409	1,276	39,853	2,672	3,908
District of Columbia	6,623,703	121,250,967	9,940,104	24,901,385	793	14,519	1,190	2,982	3,091	40,743	2,037	3,945
Florida	45,870,200	703,329,556	324,282,872	205,713,292	276	4,225	1,948	1,236	1,256	26,027	2,358	1,660
Georgia	25,935,163	641,016,168	146,410,829	118,512,731	333	8,240	1,882	1,523	1,342	19,787	2,091	1,812
Hawaii	2,861,705	136,959,373	27,280,091	29,177,734	163	7,780	1,550	1,657	2,781	17,552	1,725	1,870
Idaho	2,227,243	103,870,514	26,222,883	53,795,587	201	9,381	2,368	4,859	1,109	24,498	2,625	5,571
Illinois	66,589,175	852,362,072	209,046,878	128,948,764	282	3,609	885	546	3,044	18,474	2,403	1,572
Indiana	20,546,634	713,777,115	183,190,136	109,545,177	302	10,492	2,693	1,610	1,368	20,734	3,097	1,888
Iowa	7,072,173	344,288,896	75,250,364	80,837,275	221	10,770	2,354	2,529	1,125	19,501	2,539	2,965
Kansas*	7,222,134	163,197,961	46,934,114	70,132,414	394	8,908	2,562	3,828	1,924	18,560	2,785	4,640
Kentucky	14,061,329	449,273,520	122,202,418	88,307,473	322	10,275	2,795	2,020	1,259	22,181	3,090	2,270
Louisiana	47,995,962	464,391,824	197,492,710	76,488,614	675	6,529	2,777	1,075	1,121	17,436	3,020	1,218
Maine	4,948,666	180,319,499	63,135,219	65,248,315	84	3,068	1,074	1,110	15,416	24,934	1,393	3,194
Maryland	25,706,789	584,495,215	85,415,588	74,007,199	585	13,310	1,945	1,685	3,440	33,148	2,594	2,596
Massachusetts	15,306,295	1,255,952,054	159,339,501	177,314,173	180	14,797	1,877	2,089	1,044	30,003	2,101	2,554
Michigan	5,072,651	933,405,076	176,516,454	108,822,246	56	10,313	1,950	1,202	794	25,678	2,205	1,640
Minnesota*	4,601,164	174,230,630	33,074,616	71,574,826	123	4,676	888	1,921	1,276	21,124	2,136	4,619
Mississippi	23,100,265	358,925,025	156,042,536	92,979,576	314	4,886	2,124	1,266	1,107	22,628	2,279	1,380
Missouri	19,489,944	586,738,263	229,942,338	254,584,511	223	6,703	2,627	2,909	1,392	18,646	2,909	3,385
Montana	1,885,293	90,577,976	18,970,652	23,919,527	209	10,045	2,104	2,653	1,077	20,511	2,355	3,074
Nebraska	4,485,107	227,847,616	53,949,108	46,919,438	214	10,876	2,575	2,240	1,152	23,672	2,766	2,590
Nevada	3,694,132	82,656,275	22,332,172	28,248,744	310	6,931	1,873	2,369	2,051	22,720	2,163	2,710
New Hampshire	1,594,996	174,181,013	28,760,452	34,708,460	140	15,280	2,523	3,045	1,151	26,756	2,720	3,760
New Jersey	39,572,632	912,226,686	202,668,351	270,553,965	494	11,383	2,529	3,376	2,419	28,802	2,789	4,095
New Mexico	5,070,731	122,984,427	25,027,844	81,665,737	332	8,043	1,637	5,341	1,615	23,399	1,974	5,973
New York	466,300,468	4,557,280,923	580,034,599	2,287,747,070	1,395	13,634	1,735	6,844	6,635	40,884	2,536	8,048
North Carolina	38,847,142	824,513,124	365,512,858	492,151,181	255	5,404	2,396	3,226	946	21,036	2,593	3,489
North Dakota	1,382,259	132,792,290	19,093,182	13,220,472	158	15,215	2,188	1,515	1,246	27,816	2,531	1,979
Ohio	45,219,090	2,065,810,406	351,774,297	397,412,372	360	16,462	2,803	3,167	1,399	31,612	3,019	3,426
Oklahoma	15,556,971	361,694,461	106,411,604	87,331,445	274	6,368	1,873	1,537	1,098	18,519	2,100	1,912
Oregon*	4,124,871	114,145,536	52,544,229	129,396,578	169	4,677	2,153	5,302	1,450	18,630	2,394	6,199
Pennsylvania**	18,314,221	2,089,959,537	290,436,397	111,058,894	176	20,128	2,797	1,070	1,263	31,293	3,122	1,843
Rhode Island	4,690,904	265,972,435	34,835,634	20,744,558	284	16,115	2,111	1,257	1,592	30,848	2,351	1,630
South Carolina	41,367,368	331,047,497	113,309,042	101,372,583	549	4,396	1,505	1,346	2,935	21,376	1,816	1,580
South Dakota	1,625,073	94,476,931	18,865,545	8,058,406	218	12,676	2,531	1,081	1,086	19,440	2,741	1,318
Tennessee**	135,673	13,417,228	228,592	908,462	20	1,997	34	135	541	6,616	257	295

TABLE A5.11

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS DUALS IN 2002, BY TYPE OF SERVICE: AGED

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
Texas	82,692,879	1,527,594,662	504,654,673	923,199,745	294	5,428	1,793	3,280	1,226	19,456	2,251	3,922
Utah**	1,422,906	69,628,669	14,128,635	9,399,822	235	11,507	2,335	1,553	1,862	19,224	2,709	1,946
Vermont	2,044,561	75,637,390	35,945,135	31,512,826	106	3,932	1,869	1,638	1,241	23,689	2,078	3,687
Virginia	26,768,724	472,949,032	159,798,689	120,579,086	404	7,138	2,412	1,820	1,640	21,232	2,676	2,101
Washington	14,680,060	396,690,161	109,444,261	64,455,447	237	6,413	1,769	1,042	2,371	23,011	1,949	1,239
West Virginia	2,164,726	260,301,974	54,316,547	41,585,927	94	11,252	2,348	1,798	1,047	28,266	2,571	2,098
Wisconsin	12,364,788	712,681,446	129,223,692	67,295,883	116	6,681	1,211	631	1,295	23,017	1,481	1,423
Wyoming	790,201	47,946,209	9,055,160	8,525,433	221	13,408	2,532	2,384	1,081	23,275	2,790	2,891

SOURCE: Medicaid Analytic Extract 2002.

NOTE: Duals enrolled in Pharmacy Plus programs, which cover only prescription drugs, are included among full-benefit FFS enrollees in Florida, Illinois, Vermont, and Wisconsin. This may lead to overestimates of total FFS enrollees and underestimates of per-enrollee expenditures in these states.

**FFS duals represent less than 50 percent of all full-benefit duals in this state.

*FFS duals represent less than 75 percent of all full-benefit duals in this state.

Dual = enrolled in both Medicare and Medicaid in at least one month in 2002; FFS duals = full-benefit dual enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; IP = inpatient; ILTC = institutional long-term care; Rx = prescription drug; Other = all services other than IP, ILTC, and Rx.

TABLE A5.12

MEDICAID FEE-FOR-SERVICE (FFS) UTILIZATION AMONG FFS DUALS IN 2002, BY TYPE OF SERVICE: DISABLED

	Number Using Service				Percentage Using Service			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	517,084	266,622	2,250,956	2,309,362	19.8	10.2	86.3	88.5
Alabama	14,496	4,680	53,073	53,551	24.3	7.8	88.9	89.7
Alaska	712	133	4,676	4,854	13.4	2.5	88.1	91.5
Arizona**	824	144	663	3,180	7.3	1.3	5.9	28.1
Arkansas	8,218	3,338	30,528	35,186	20.2	8.2	75.2	86.7
California	41,939	21,519	309,906	315,155	11.7	6.0	86.8	88.3
Colorado	2,901	1,357	14,140	14,938	17.5	8.2	85.2	90.0
Connecticut	5,743	3,784	26,019	26,843	20.0	13.2	90.8	93.7
Delaware	656	449	3,314	3,468	17.3	11.9	87.6	91.7
District of Columbia	2,280	547	6,773	6,874	26.9	6.4	79.8	81.0
Florida	48,872	45,643	170,692	161,376	24.8	23.2	86.7	82.0
Georgia	19,439	5,327	73,197	75,364	22.5	6.2	84.9	87.4
Hawaii	687	3,180	7,433	7,743	8.1	37.6	87.8	91.4
Idaho	1,678	720	8,067	8,494	18.5	7.9	88.8	93.5
Illinois	29,644	23,417	101,781	107,030	24.8	19.6	85.0	89.4
Indiana	11,505	6,455	39,357	42,740	24.7	13.9	84.5	91.8
Iowa	5,692	2,745	24,365	25,818	20.7	10.0	88.6	93.9
Kansas*	3,267	1,399	13,749	14,573	20.8	8.9	87.5	92.8
Kentucky	13,151	3,558	49,724	51,291	24.0	6.5	90.6	93.4
Louisiana	24,727	6,868	35,010	36,103	59.1	16.4	83.7	86.3
Maine	440	943	25,480	21,556	1.5	3.2	85.3	72.2
Maryland	6,435	2,529	25,260	26,433	20.7	8.1	81.1	84.9
Massachusetts	22,855	9,673	103,908	106,550	19.7	8.3	89.7	91.9
Michigan	7,093	4,375	89,067	83,853	7.1	4.4	88.8	83.6
Minnesota*	8,524	4,689	36,495	39,078	20.9	11.5	89.4	95.7
Mississippi	17,920	3,849	65,809	66,466	25.1	5.4	92.3	93.2
Missouri	14,616	4,441	58,456	60,049	22.3	6.8	89.1	91.6
Montana	1,542	556	6,246	6,778	21.1	7.6	85.6	92.9
Nebraska	3,154	1,469	13,288	13,998	21.4	10.0	90.2	95.0
Nevada	958	586	6,294	6,721	12.6	7.7	82.5	88.1
New Hampshire	1,116	404	7,365	7,621	13.7	5.0	90.5	93.6
New Jersey	16,266	8,977	62,264	61,720	23.5	13.0	89.8	89.0
New Mexico	3,073	1,014	13,774	14,733	19.1	6.3	85.7	91.6
New York	52,165	25,503	217,220	230,085	20.7	10.1	86.2	91.3
North Carolina	21,898	6,011	82,317	86,323	23.6	6.5	88.6	92.9
North Dakota	714	712	3,911	4,503	14.4	14.4	79.1	91.1
Ohio	22,204	12,311	80,324	84,966	24.8	13.7	89.6	94.8
Oklahoma	6,291	3,311	25,535	25,652	20.6	10.8	83.4	83.8
Oregon*	1,955	726	15,427	14,382	11.5	4.3	90.8	84.6
Pennsylvania**	6,238	5,253	31,007	30,661	16.9	14.2	84.0	83.1
Rhode Island	2,681	1,938	12,582	12,984	19.0	13.7	89.1	91.9
South Carolina	9,387	2,372	44,067	44,352	18.9	4.8	88.7	89.3
South Dakota	1,327	765	5,223	5,995	20.4	11.8	80.5	92.4
Tennessee**	140	57	355	1,105	6.3	2.6	16.0	49.7
Texas	20,038	15,320	76,181	82,009	20.4	15.6	77.4	83.4
Utah**	629	1,002	3,341	3,547	14.6	23.3	77.7	82.5
Vermont	1,476	259	9,837	8,946	13.5	2.4	90.1	81.9
Virginia	9,204	3,339	35,623	37,669	22.4	8.1	86.5	91.5
Washington	4,996	1,929	40,889	41,840	10.7	4.1	87.5	89.5
West Virginia	2,269	1,186	22,413	23,071	8.9	4.6	87.8	90.4
Wisconsin	12,557	5,596	56,115	58,542	19.2	8.5	85.6	89.3
Wyoming	492	264	2,416	2,593	17.1	9.2	83.8	89.9

SOURCE: Medicaid Analytic Extract 2002.

NOTE: Duals enrolled in Pharmacy Plus programs, which cover only prescription drugs, are included among full-benefit FFS enrollees in Florida, Illinois, Vermont, and Wisconsin. This may lead to overestimates of total FFS enrollees in these states.

**FFS duals represent less than 50 percent of full-benefit duals in this state; *FFS duals represent less than 75 percent of full-benefit duals in this state.

Dual = enrolled in both Medicare and Medicaid in at least one month in 2002; FFS duals = full-benefit dual enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; IP = inpatient; ILTC = institutional long-term care; Rx = prescription drug; Other = all services other than IP, ILTC, and Rx.

TABLE A5.13

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS DUALS IN 2002, BY TYPE OF SERVICE: DISABLED

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
United States	**1,454,293,306**	**11,055,459,880**	**8,049,656,726**	**14,824,053,823**	**558**	**4,238**	**3,086**	**5,683**	**2,812**	**41,465**	**3,576**	**6,419**
Alabama	20,803,375	164,012,521	130,992,260	267,920,212	348	2,747	2,194	4,487	1,435	35,045	2,468	5,003
Alaska	2,986,959	9,581,543	24,845,247	59,167,062	563	1,805	4,682	11,149	4,195	72,042	5,313	12,189
Arizona**	2,559,908	2,720,798	608,278	22,198,922	227	241	54	1,965	3,107	18,894	917	6,981
Arkansas	13,018,560	110,590,629	64,815,089	155,715,962	321	2,724	1,596	3,835	1,584	33,131	2,123	4,426
California	171,245,946	791,553,809	1,162,849,013	1,573,586,782	480	2,217	3,256	4,406	4,083	36,784	3,752	4,993
Colorado	5,711,611	44,849,236	61,062,965	190,973,842	344	2,702	3,679	11,507	1,969	33,050	4,318	12,784
Connecticut	13,666,934	252,398,388	124,703,786	370,794,825	477	8,809	4,352	12,941	2,380	66,701	4,793	13,813
Delaware	1,504,869	31,353,513	13,927,977	46,175,711	398	8,288	3,682	12,206	2,294	69,830	4,203	13,315
District of Columbia	12,758,663	31,514,538	22,295,010	49,738,058	1,503	3,712	2,626	5,858	5,596	57,613	3,292	7,236
Florida	83,460,307	1,241,475,204	686,267,049	502,631,166	424	6,309	3,487	2,554	1,708	27,200	4,020	3,115
Georgia	48,904,062	170,764,193	186,019,846	262,851,777	567	1,981	2,157	3,049	2,516	32,056	2,541	3,488
Hawaii	2,506,552	21,736,315	24,185,481	35,802,738	296	2,567	2,856	4,229	3,649	6,835	3,254	4,624
Idaho	3,129,091	33,373,863	31,477,606	87,315,171	345	3,676	3,467	9,616	1,865	46,353	3,902	10,280
Illinois	126,567,528	744,655,808	359,963,634	523,621,635	1,057	6,221	3,007	4,374	4,270	31,800	3,537	4,892
Indiana	25,684,777	277,548,624	166,560,051	286,725,218	552	5,962	3,578	6,160	2,232	42,997	4,232	6,709
Iowa	11,428,070	144,871,864	86,417,112	148,708,096	416	5,269	3,143	5,409	2,008	52,777	3,547	5,760
Kansas*	8,614,518	52,882,668	52,067,426	164,106,042	548	3,367	3,315	10,448	2,637	37,800	3,787	11,261
Kentucky	26,154,308	133,080,472	171,325,026	187,487,345	476	2,424	3,120	3,414	1,989	37,403	3,446	3,655
Louisiana	33,132,580	233,716,457	108,383,522	110,602,169	792	5,586	2,590	2,643	1,340	34,030	3,096	3,064
Maine	10,133,743	32,279,934	73,093,025	239,081,011	339	1,081	2,447	8,004	23,031	34,231	2,869	11,091
Maryland	27,507,364	114,586,658	90,184,613	266,739,317	884	3,681	2,897	8,568	4,275	45,309	3,570	10,091
Massachusetts	40,622,094	358,809,967	370,293,104	864,302,609	350	3,096	3,195	7,457	1,777	37,094	3,564	8,112
Michigan	11,775,801	129,336,062	284,674,867	88,598,249	117	1,290	2,839	884	1,660	29,563	3,196	1,057
Minnesota*	19,384,756	198,620,448	145,071,766	643,734,803	475	4,866	3,554	15,772	2,274	42,359	3,975	16,473
Mississippi	30,313,763	137,660,433	170,834,685	139,017,699	425	1,931	2,397	1,950	1,692	35,765	2,596	2,092
Missouri	23,054,219	139,886,179	261,152,232	349,266,498	352	2,133	3,982	5,326	1,577	31,499	4,468	5,816
Montana	2,806,355	20,249,341	21,564,370	29,747,327	385	2,775	2,956	4,077	1,820	36,420	3,453	4,389
Nebraska	6,916,032	64,860,917	51,757,542	102,640,734	469	4,401	3,512	6,964	2,193	44,153	3,895	7,333
Nevada	6,192,654	19,095,662	21,786,375	38,967,610	811	2,502	2,854	5,105	6,464	32,586	3,461	5,798
New Hampshire	2,089,117	12,162,770	31,374,713	130,791,358	257	1,494	3,854	16,066	1,872	30,106	4,260	17,162
New Jersey	44,123,516	534,864,241	276,646,564	482,886,516	637	7,716	3,991	6,966	2,713	59,582	4,443	7,824
New Mexico	7,460,470	34,655,572	39,680,608	176,947,444	464	2,155	2,468	11,005	2,428	34,177	2,881	12,010
New York	299,067,114	2,002,566,362	903,951,707	3,114,054,355	1,186	7,944	3,586	12,353	5,733	78,523	4,161	13,534
North Carolina	44,041,811	290,984,333	266,143,573	358,342,457	474	3,131	2,864	3,856	2,011	48,409	3,233	4,151
North Dakota	1,541,962	39,110,970	13,712,833	40,660,718	312	7,911	2,774	8,224	2,160	54,931	3,506	9,030
Ohio	66,104,452	582,321,001	322,947,565	723,299,886	737	6,495	3,602	8,067	2,977	47,301	4,021	8,513
Oklahoma	9,811,191	99,564,089	67,719,642	172,716,418	321	3,253	2,212	5,643	1,560	30,071	2,652	6,733
Oregon*	3,006,075	18,184,018	70,395,645	85,163,932	177	1,070	4,142	5,011	1,538	25,047	4,563	5,922

TABLE A5.13

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS DUALS IN 2002, BY TYPE OF SERVICE: DISABLED

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
Pennsylvania**	13,573,253	333,037,994	135,750,314	42,175,230	368	9,023	3,678	1,143	2,176	63,400	4,378	1,376
Rhode Island	7,636,944	154,893,151	47,236,808	75,936,959	541	10,969	3,345	5,378	2,849	79,924	3,754	5,849
South Carolina	29,592,514	111,361,374	115,716,941	193,295,855	596	2,243	2,330	3,893	3,152	46,948	2,626	4,358
South Dakota	1,920,779	24,982,278	18,403,594	52,808,845	296	3,849	2,835	8,136	1,447	32,657	3,524	8,809
Tennessee**	140,737	336,782	135,189	388,820	63	152	61	175	1,005	5,908	381	352
Texas	53,051,445	581,379,449	196,713,204	430,076,047	539	5,910	2,000	4,372	2,648	37,949	2,582	5,244
Utah**	2,138,614	39,581,026	13,705,294	15,115,738	497	9,207	3,188	3,516	3,400	39,502	4,102	4,262
Vermont	2,682,895	5,242,444	33,220,920	73,988,642	246	480	3,043	6,777	1,818	20,241	3,377	8,271
Virginia	17,903,265	166,395,741	131,778,770	220,029,174	435	4,041	3,200	5,343	1,945	49,834	3,699	5,841
Washington	18,522,355	44,634,651	129,902,635	63,721,273	396	955	2,779	1,363	3,707	23,139	3,177	1,523
West Virginia	7,744,727	54,295,686	65,092,463	142,764,788	303	2,127	2,550	5,593	3,413	45,781	2,904	6,188
Wisconsin	28,759,307	206,057,252	190,825,829	381,082,346	439	3,144	2,911	5,814	2,290	36,822	3,401	6,510
Wyoming	835,364	10,782,652	9,422,958	39,588,432	290	3,739	3,267	13,727	1,698	40,843	3,900	15,267

SOURCE: Medicaid Analytic Extract 2002.

NOTE: Duals enrolled in Pharmacy Plus programs, which cover only prescription drugs, are included among full-benefit FFS enrollees in Florida, Illinois, Vermont, and Wisconsin. This may lead to overestimates of total FFS enrollees and underestimates of per-enrollee expenditures in these states.

**FFS duals represent less than 50 percent of all full-benefit duals in this state.

*FFS duals represent less than 75 percent of all full-benefit duals in this state.

Dual = enrolled in both Medicare and Medicaid in at least one month in 2002; FFS duals = full-benefit dual enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; IP = inpatient; ILTC = institutional long-term care; Rx = prescription drug; Other = all services other than IP, ILTC, and Rx.

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Also see tables A3.15-A3.18 and tables A5.6-A5.13 for inpatient (IP), institutional long-term care (ILTC), prescription drug (Rx), and other (OT) Medicaid service utilization and expenditures.

NOTE: Medicaid utilization and expenditures provided under managed care plans (including PHPs, PCCMs, or other types of managed care) are not included in data presented in this chapter.

TABLE A5.13

MEDICAID FEE-FOR-SERVICE (FFS) EXPENDITURES AMONG FFS DUALS IN 2002, BY TYPE OF SERVICE: DISABLED

	Total Expenditures				Expenditures per Enrollee				Expenditures per User			
	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other	IP	ILTC	Rx	Other
Pennsylvania**	13,573,253	333,037,994	135,750,314	42,175,230	368	9,023	3,678	1,143	2,176	63,400	4,378	1,376
Rhode Island	7,636,944	154,893,151	47,236,803	5,936,959	541	10,969	3,345	5,378	2,849	79,924	3,754	5,849
South Carolina	29,592,514	111,361,374	115,716,941	193,295,855	596	2,243	2,330	3,893	3,152	46,948	2,626	4,358
South Dakota	1,920,779	24,982,278	16,403,594	8,809,845	296	3,849	2,835	8,136	1,447	32,657	3,524	8,809
Tennessee**	140,737	336,782	135,189	388,820	63	152	61	175	1,005	5,908	381	352
Texas	53,051,445	581,379,449	196,713,204	85,000,047	539	5,910	2,000	4,372	2,648	37,949	2,582	5,244
Utah**	2,138,614	39,581,026	13,705,294	15,115,738	497	9,207	3,188	3,516	3,400	39,502	4,102	4,262
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Virginia	17,903,265	166,395,741	131,778,770	220,029,174	435	4,041	3,200	5,343	1,945	49,834	3,699	5,841
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West Virginia	7,744,727	54,295,686	65,092,463	142,764,788	303	2,127	2,550	5,593	3,413	45,781	2,904	6,188
Wisconsin	28,759,307	206,057,252	190,858,829	181,082,346	439	3,144	2,911	5,814	2,290	36,822	3,401	6,510
Wyoming	835,364	10,782,652	9,422,958	39,588,432	290	3,739	3,267	13,727	1,698	40,843	3,900	15,267

SOURCE: Medicaid Analytic Extract 2002.

NOTE: Duals enrolled in Pharmacy Plus programs, which cover only prescription drugs, are included among full-benefit FFS enrollees in Florida, Illinois, Vermont, and Wisconsin. This may lead to overestimates of total FFS enrollees and underestimates of per-enrollee expenditures in these states.

**FFS duals represent less than 50 percent of all full-benefit duals in this state

*FFS duals represent less than 75 percent of all full-benefit duals in this state

Dual = enrolled in both Medicare and Medicaid in at least one month in 2002, FFS duals = full-benefit dual enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; IP = inpatient; ILTC = institutional long-term care; Rx = prescription drug; Other = all services other than IP, ILTC, and Rx.

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NOTE: Medicaid utilization and expenditures provided under managed care plans (including PHPs, PCCMs, or other types of managed care) are not included in data presented in this chapter.

TABLE A6.1

INSTITUTIONAL LONG-TERM CARE UTILIZATION (FFS ONLY) AMONG FFS ENROLLEES

	Number Using Service				Percentage Using Service			
	ICF/MR	Inp Psych < Age 21	MH Aged	NF	ICF/MR	Inp Psych < Age 21	MH Aged	NF
United States	106,976	55,441	22,331	1,442,543	0.4	0.2	0.1	5.1
Alabama	526	0	548	25,551	0.1	0.0	0.1	3.7
Alaska	0	1,159	6	871	0.0	0.9	0.0	0.7
Arizona**	0	69	0	958	0.0	0.0	0.0	0.6
Arkansas	1,762	4,442	0	19,377	0.3	0.8	0.0	3.6
California**	8,338	405	41	109,141	0.3	0.0	0.0	4.4
Colorado**	122	74	31	13,698	0.1	0.0	0.0	7.1
Connecticut**	1,254	261	374	29,755	0.9	0.2	0.3	22.3
Delaware**	258	24	15	3,426	1.6	0.1	0.1	20.7
District of Columbia	777	107	63	4,214	1.7	0.2	0.1	9.2
Florida*	3,398	0	157	77,241	0.2	0.0	0.0	4.8
Georgia	1,291	0	0	40,526	0.1	0.0	0.0	2.7
Hawaii**	197	0	0	11,586	0.4	0.0	0.0	25.6
Idaho	640	830	703	5,042	0.3	0.4	0.4	2.6
Illinois	10,190	4,035	1,753	76,214	0.5	0.2	0.1	4.0
Indiana*	5,078	935	114	40,666	0.9	0.2	0.0	7.2
Iowa*	2,305	799	7	20,190	0.9	0.3	0.0	7.8
Kansas*	642	271	188	10,421	0.4	0.1	0.1	5.8
Kentucky	914	2,466	128	25,255	0.2	0.4	0.0	4.2
Louisiana	5,842	2,829	6,432	32,910	0.6	0.3	0.6	3.3
Maine	276	831	13	8,579	0.1	0.2	0.0	2.4
Maryland**	457	711	60	22,258	0.3	0.5	0.0	15.2
Massachusetts*	1,191	2,997	38	53,740	0.1	0.4	0.0	6.5
Michigan**	177	158	116	42,696	0.0	0.0	0.0	9.0
Minnesota**	2,779	238	17	14,031	1.3	0.1	0.0	6.4
Mississippi	2,732	1,620	191	19,400	0.4	0.2	0.0	2.7
Missouri*	1,296	190	7	38,418	0.2	0.0	0.0	6.4
Montana	134	476	86	5,258	0.1	0.4	0.1	4.9
Nebraska	656	1,073	10	11,531	0.3	0.5	0.0	5.2
Nevada**	275	671	98	4,635	0.3	0.7	0.1	4.6
New Hampshire	28	227	0	7,298	0.0	0.2	0.0	6.9
New Jersey**	3,353	1,222	405	42,683	1.2	0.4	0.1	14.7
New Mexico**	244	561	42	6,618	0.2	0.5	0.0	6.0
New York*	10,257	8,471	5,177	145,482	0.4	0.3	0.2	5.1
North Carolina	4,642	1,875	272	44,837	0.3	0.1	0.0	3.3
North Dakota	663	69	25	5,336	0.9	0.1	0.0	7.5
Ohio*	8,110	1,054	52	81,984	0.6	0.1	0.0	6.5
Oklahoma*	2,040	2,295	226	23,838	0.5	0.6	0.1	6.1
Oregon**	49	230	63	7,411	0.0	0.1	0.0	4.3
Pennsylvania**	2,002	1,786	407	74,284	0.4	0.4	0.1	15.1
Rhode Island**	49	74	68	11,368	0.1	0.1	0.1	22.5
South Carolina	2,093	867	312	17,380	0.3	0.1	0.0	2.3
South Dakota	226	465	62	5,817	0.2	0.4	0.1	5.2
Tennessee**	1	270	0	2,293	0.0	0.3	0.0	2.2
Texas*	13,273	4,481	2,436	91,972	0.6	0.2	0.1	4.2
Utah**	772	73	16	4,725	0.7	0.1	0.0	4.5
Vermont	14	43	7	3,608	0.0	0.0	0.0	2.3
Virginia**	2,046	443	473	26,543	0.6	0.1	0.1	8.2
Washington**	61	0	899	21,761	0.0	0.0	0.2	5.4
West Virginia	562	1,309	0	10,973	0.2	0.5	0.0	3.8
Wisconsin**	2,885	1,810	192	36,310	0.8	0.5	0.0	9.4
Wyoming	99	145	1	2,434	0.1	0.2	0.0	3.6

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

FFS = fee-for-service; FFS enrollees = full-benefit enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; ICF/MR = intermediate care facility for the mentally retarded; Inp Psych = inpatient psychiatric; MH = mental hospital; NF = nursing facility.

TABLE A6.2

INSTITUTIONAL LONG-TERM CARE EXPENDITURES (FFS ONLY) AMONG FFS ENROLLEES

	Total Expenditures				Expenditures per User			
	ICF/MR	Inp Psych < Age 21	MH Aged	NF	ICF/MR	Inp Psych < Age 21	MH Aged	NF
United States	10,052,209,941	1,192,984,071	381,541,118	37,509,193,270	93,967	21,518	17,086	26,002
Alabama	58,432,734	0	23,706,175	663,918,792	111,089	-	43,259	25,984
Alaska	0	47,924,935	10,926	61,076,504	-	41,350	1,821	70,122
Arizona**	0	445,007	0	19,833,084	-	6,449	-	20,703
Arkansas	115,111,528	94,659,251	0	125	65,330	21,310	-	21,683
California**	592,121,351	7,439,674	647,130	2,728,353,104	71,015	18,370	15,784	24,998
Colorado**	15,328,816	1,614,600	2,374,651	354,829,983	125,646	21,819	76,602	25,904
Connecticut**	225,577,150	4,964,860	2,384,594	1,053,147,940	179,886	19,022	6,376	35,394
Delaware**	29,172,986	379,839	1,280,615	140,262,399	113,074	15,827	85,374	40,941
District of Columbia	74,348,610	1,696,700	2,479,033	163,273,467	95,687	15,857	39,350	38,745
Florida*	311,230,403	0	6,965,326	1,931,746,423	91,592	-	44,365	25,009
Georgia	116,245,436	0	0	828,882,866	90,043	-	-	20,453
Hawaii**	5,818,729	0	0	172,931,526	29,537	-	-	14,926
Idaho	54,532,880	8,683,792	4,479,024	120,773,596	85,208	10,462	6,371	23,954
Illinois	625,279,983	52,147,496	38,322,943	1,476,379,509	61,362	12,924	21,861	19,372
Indiana*	333,034,511	15,496,677	4,134,839	831,090,259	65,584	16,574	36,271	20,437
Iowa*	207,768,820	22,148,536	520,853	397,252,891	90,138	27,720	74,408	19,676
Kansas*	53,215,347	4,924,229	3,536,471	191,502,335	82,890	18,171	18,811	18,377
Kentucky	102,187,133	31,552,020	326,394	575,076,938	111,802	12,795	2,550	22,771
Louisiana	362,162,422	11,738,453	22,685,361	578,586,267	61,993	4,149	3,527	17,581
Maine	31,509,403	33,070,159	324,820	204,201,554	114,165	39,796	24,986	23,802
Maryland**	58,935,867	48,133,870	5,366,699	749,799,491	128,963	67,699	89,445	33,687
Massachusetts*	206,253,517	42,287,630	3,013,195	1,627,303,741	173,177	14,110	79,295	30,281
Michigan**	23,046,890	10,390,645	7,426,572	1,110,239,493	130,208	65,764	64,022	26,003
Minnesota**	196,473,008	9,566,265	708,783	281,864,410	70,699	40,194	41,693	20,089
Mississippi	177,807,022	12,400,130	174,120	437,835,391	65,083	7,654	912	22,569
Missouri*	109,768,425	2,215,678	88,788	713,976,651	84,698	11,661	12,684	18,584
Montana	15,841,760	14,588,440	3,201,898	104,331,435	118,222	30,648	37,231	19,842
Nebraska	47,390,092	27,808,832	317,604	284,493,686	72,241	25,917	31,760	24,672
Nevada**	26,862,009	20,399,953	123,655	108,139,434	97,680	30,402	1,262	23,331
New Hampshire	2,009,116	2,005,544	0	196,973,697	71,754	8,835	-	26,990
New Jersey**	435,772,683	78,346,185	18,268,014	1,285,512,523	129,965	64,113	45,106	30,118
New Mexico**	16,833,244	14,601,399	74,035	164,335,004	68,989	26,027	1,763	24,832
New York*	2,446,840,673	290,783,946	121,112,375	5,910,411,071	238,553	34,327	23,394	40,626
North Carolina	411,512,831	22,270,691	6,740,552	920,771,940	88,650	11,878	24,781	20,536
North Dakota	52,301,848	969,909	1,143,658	146,105,526	78,887	14,057	45,746	27,381
Ohio*	604,952,974	5,600,973	69,664	2,528,615,720	74,593	5,314	1,340	30,843
Oklahoma*	105,783,261	42,150,578	410,925	442,172,282	51,855	18,366	1,818	18,549
Oregon**	9,887,601	10,513,724	4,639,249	132,523,404	201,788	45,712	73,639	17,882
Pennsylvania**	265,728,478	39,734,025	37,695,421	2,319,067,974	132,732	22,247	92,618	31,219
Rhode Island**	6,690,959	7,060,467	294,283	476,646,005	136,550	95,412	4,328	41,929
South Carolina	159,210,900	26,082,296	14,096,909	360,222,837	76,068	30,083	45,182	20,726
South Dakota	17,623,058	15,127,814	3,072,760	112,825,076	77,978	32,533	49,561	19,396
Tennessee**	79,704	1,424,627	0	15,222,095	79,704	5,276	-	6,639
Texas*	809,461,511	39,171,018	8,080,074	1,772,178,946	60,986	8,742	3,317	19,269
Utah**	47,393,185	6,535,182	1,444,356	94,835,867	61,390	89,523	90,272	20,071
Vermont	1,814,499	317,223	344,345	83,234,905	129,607	7,377	49,192	23,070
Virginia**	205,651,096	2,086,167	18,831,077	560,286,944	100,514	4,709	39,812	21,109
Washington**	3,896,686	0	6,530,737	488,045,924	63,880	-	7,264	22,428
West Virginia	49,972,380	25,225,199	0	307,907,335	88,919	19,271	-	28,060
Wisconsin**	213,669,961	33,118,845	3,983,934	805,505,442	74,062	18,298	20,750	22,184
Wyoming	9,666,461	3,180,588	108,281	54,543,548	97,641	21,935	108,281	22,409

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

- = not applicable; FFS = fee-for-service; FFS enrollees = full-benefit enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; ICF/MR = intermediate care facility for the mentally retarded; Inp Psych = inpatient psychiatric; MH = mental hospital; NF = nursing facility.

TABLE A6.3

COMMUNITY-BASED LONG-TERM CARE UTILIZATION (FFS ONLY) AMONG FFS ENROLLEES

	Number Using Service					Percentage Using Service				
	Adult Day	HH	Hospice	Pers Care	Res Care	Adult Day	HH	Hospice	Pers Care	Res Care
United States	237,322	670,743	82,084	392,346	480,273	0.8	2.4	0.3	1.4	1.7
Alabama	248	48,823	2,407	0	2,466	0.0	7.1	0.4	0.0	0.4
Alaska	818	256	5	3,367	1,640	0.7	0.2	0.0	2.7	1.3
Arizona**	3	274	0	861	2	0.0	0.2	0.0	0.5	0.0
Arkansas	6,554	7,113	391	18,107	824	1.2	1.3	0.1	3.3	0.2
California**	48,314	24,429	77	700	274,420	1.9	1.0	0.0	0.0	11.1
Colorado**	818	6,926	2,128	0	2,955	0.4	3.6	1.1	0.0	1.5
Connecticut**	4,702	20,070	38	10,688	3,899	3.5	15.1	0.0	8.0	2.9
Delaware**	523	786	167	0	692	3.2	4.7	1.0	0.0	4.2
District of Columbia*	2,022	1,853	133	87	0	4.4	4.0	0.3	0.2	0.0
Florida*	9,932	29,793	12,739	5,571	25,062	0.6	1.9	0.8	0.3	1.6
Georgia	11,532	17,991	4,499	0	6,057	0.8	1.2	0.3	0.0	0.4
Hawaii**	0	4,388	50	0	0	0.0	9.7	0.1	0.0	0.0
Idaho	287	1,792	120	5,437	2,663	0.1	0.9	0.1	2.8	1.4
Illinois	1,293	12,384	5,251	17,139	150	0.1	0.6	0.3	0.9	0.0
Indiana*	3,085	7,168	2,663	14	3,908	0.5	1.3	0.5	0.0	0.7
Iowa*	2,104	18,131	0	0	6,454	0.8	7.0	0.0	0.0	2.5
Kansas*	3,767	3,620	1,292	15,032	4,607	2.1	2.0	0.7	8.3	2.5
Kentucky	4,717	16,707	2,541	0	2,221	0.8	2.8	0.4	0.0	0.4
Louisiana	871	10,957	2,101	142	0	0.1	1.1	0.2	0.0	0.0
Maine	3,854	3,012	66	3,045	4,841	1.1	0.8	0.0	0.8	1.3
Maryland**	4,100	7,321	1,049	3,822	0	2.8	5.0	0.7	2.6	0.0
Massachusetts*	13,226	28,878	2,575	5,532	15,073	1.6	3.5	0.3	0.7	1.8
Michigan**	0	4,813	557	0	3,313	0.0	1.0	0.1	0.0	0.7
Minnesota**	8,271	28,014	738	17,014	538	3.8	12.8	0.3	7.8	0.2
Mississippi	448	8,658	1,222	18	144	0.1	1.2	0.2	0.0	0.0
Missouri*	2,812	2,422	777	41,840	6,187	0.5	0.4	0.1	7.0	1.0
Montana	1,635	488	142	2,925	593	1.5	0.5	0.1	2.7	0.6
Nebraska	856	4,672	648	1,201	490	0.4	2.1	0.3	0.5	0.2
Nevada**	0	1,212	553	2,696	0	0.0	1.2	0.6	2.7	0.0
New Hampshire	1,808	2,437	0	161	360	1.7	2.3	0.0	0.2	0.3
New Jersey**	9,709	9,610	2,740	19,637	2,552	3.3	3.3	0.9	6.8	0.9
New Mexico**	1,033	405	468	5,976	1	0.9	0.4	0.4	5.4	0.0
New York*	60,198	174,027	4,978	99,126	75,793	2.1	6.1	0.2	3.5	2.7
North Carolina	541	30,876	2,981	39,257	3,822	0.0	2.3	0.2	2.9	0.3
North Dakota	14	1,018	223	0	263	0.0	1.4	0.3	0.0	0.4
Ohio*	2,263	32,836	7,656	0	30	0.2	2.6	0.6	0.0	0.0
Oklahoma*	4,094	2,952	0	11,615	3,059	1.0	0.8	0.0	3.0	0.8
Oregon**	317	767	230	6,285	5,484	0.2	0.4	0.1	3.6	3.2
Pennsylvania**	85	9,891	453	6,118	595	0.0	2.0	0.1	1.2	0.1
Rhode Island**	3,773	2,912	341	1,433	205	7.5	5.8	0.7	2.8	0.4
South Carolina	5,792	7,565	549	16,116	4,022	0.8	1.0	0.1	2.1	0.5
South Dakota	8	376	48	2,152	8	0.0	0.3	0.0	1.9	0.0
Tennessee**	4	195	84	0	0	0.0	0.2	0.1	0.0	0.0
Texas*	0	53,759	11,124	1,040	0	0.0	2.5	0.5	0.0	0.0
Utah**	653	776	507	356	1,423	0.6	0.7	0.5	0.3	1.3
Vermont	0	3,448	84	1,544	0	0.0	2.2	0.1	1.0	0.0
Virginia**	4,554	2,819	485	9,593	6,750	1.4	0.9	0.1	3.0	2.1
Washington**	20	2,984	1,920	24	0	0.0	0.7	0.5	0.0	0.0
West Virginia	2,957	4,150	437	4,458	3,636	1.0	1.4	0.2	1.5	1.3
Wisconsin**	1,708	3,507	1,803	12,217	2,260	0.4	0.9	0.5	3.2	0.6
Wyoming	999	482	44	0	811	1.5	0.7	0.1	0.0	1.2

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

Adult Day = adult day care; FFS = fee-for-service; FFS enrollees = full-benefit enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; HH = home health; Pers Care = personal care; Res Care = residential care.

TABLE A6.4

COMMUNITY-BASED LONG-TERM CARE EXPENDITURES (FFS ONLY) AMONG FFS ENROLLEES

	Total Expenditures					Expenditures per User				
	Adult Day	HH	Hospice	Pers Care	Res Care	Adult Day	HH	Hospice	Pers Care	Res Care
United States	**2,495,771,828**	**2,882,344,205**	**646,275,944**	**3,723,583,814**	**6,502,680,397**	**10,516**	**4,297**	**7,873**	**9,491**	**13,540**
Alabama	542,071	19,625,826	24,115,619	0	88,178,103	2,186	402	10,019	-	35,758
Alaska	7,980,692	734,451	36,680	44,423,820	60,078,104	9,756	2,869	7,336	13,194	36,633
Arizona**	40,233	509,006	0	3,572,948	16,732	13,411	1,858	-	4,150	8,366
Arkansas	24,098,233	9,891,842	1,998,358	68,121,275	1,126,004	3,677	1,391	5,111	3,762	1,367
California**	337,925,093	145,187,106	3,574	430,178	2,166,725,218	6,994	5,943	46	615	7,896
Colorado**	3,710,911	70,281,365	14,159,071	0	22,959,785	4,537	10,147	6,654	-	7,770
Connecticut**	66,879,785	175,343,113	319,578	75,269,755	278,890,863	14,224	8,737	8,410	7,042	71,529
Delaware**	3,642,777	5,041,601	1,671,707	0	14,976,463	6,965	6,414	10,010	-	21,642
District of Columbia**	13,312,162	16,158,169	666,904	129,374	0	6,584	8,720	5,014	1,487	-
Florida*	59,862,381	166,924,988	112,382,194	19,211,774	289,586,530	6,027	5,603	8,822	3,449	11,555
Georgia	80,514,822	79,263,985	33,731,052	0	53,733,806	6,982	4,406	7,497	-	8,871
Hawaii**	0	21,309,896	390,841	0	0	-	4,856	7,817	-	-
Idaho	485,994	3,451,020	807,073	47,240,584	20,879,257	1,693	1,926	6,726	8,689	7,841
Illinois	4,341,229	36,511,230	31,819,286	116,610,793	1,400,009	3,357	2,948	6,060	6,804	9,333
Indiana*	10,460,547	50,739,568	17,192,114	3,407	134,449,337	3,391	7,079	6,456	243	34,404
Iowa*	6,997,064	61,348,291	0	0	119,495,130	3,326	3,384	0	-	18,515
Kansas*	43,017,749	19,411,415	8,321,875	104,485,248	114,427,723	11,420	5,362	6,441	6,951	24,838
Kentucky	24,345,481	49,465,691	14,315,301	0	68,524,694	5,161	2,961	5,634	-	30,853
Louisiana	4,452,672	25,787,408	10,058,966	1,962,686	0	5,112	2,354	4,788	13,822	-
Maine	48,543,587	6,690,270	346,771	6,449,436	47,363,551	12,596	2,221	5,254	2,118	9,784
Maryland**	44,072,781	187,161,074	9,028,253	23,409,747	0	10,749	25,565	8,607	6,125	-
Massachusetts*	129,891,301	177,320,825	18,580,770	4,133,769	532,208,664	9,821	6,140	7,216	747	35,309
Michigan**	0	21,110,019	3,382,765	0	23,072,237	-	4,386	6,073	-	6,964
Minnesota**	100,281,292	39,970,602	5,586,617	218,400,634	7,083,563	12,124	1,427	7,570	12,837	13,166
Mississippi	3,275,059	13,592,963	11,476,719	20,082	399,931	7,310	1,570	9,392	1,116	2,777
Missouri*	6,857,583	2,711,522	4,018,638	191,779,509	100,299,335	2,439	1,120	5,172	4,584	16,211
Montana	4,271,769	686,726	702,409	23,483,102	8,369,313	2,613	1,407	4,947	8,028	14,114
Nebraska	3,101,127	19,341,818	4,088,939	6,769,359	5,671,463	3,623	4,140	6,310	5,636	11,574
Nevada**	0	5,457,384	3,957,574	18,134,369	0	-	4,503	7,157	6,726	-
New Hampshire	29,841,472	5,913,229	0	4,920,992	5,759,867	16,505	2,426	-	30,565	16,000
New Jersey**	71,018,059	67,713,655	22,304,256	203,653,347	34,700,786	7,315	7,046	8,140	10,371	13,597
New Mexico**	11,066,584	425,596	4,542,677	105,232,181	2,781	10,713	1,051	9,707	17,609	2,781
New York*	1,043,936,653	914,793,517	43,166,946	1,922,067,737	1,654,063,105	17,342	5,257	8,672	19,390	21,823
North Carolina	3,135,785	80,160,791	22,521,620	121,343,868	100,842,175	5,796	2,596	7,555	3,091	26,385
North Dakota	49,578	2,408,342	1,276,636	0	5,170,660	3,541	2,366	5,725	-	19,660

TABLE A6.4

COMMUNITY-BASED LONG-TERM CARE EXPENDITURES (FFS ONLY) AMONG FFS ENROLLEES

	Total Expenditures					Expenditures per User				
	Adult Day	HH	Hospice	Pers Care	Res Care	Adult Day	HH	Hospice	Pers Care	Res Care
Ohio*	10,721,996	101,787,597	64,777,493	0	127,617	4,738	3,100	8,461	-	4,254
Oklahoma*	105,853,209	1,878,417	0	40,916,602	26,891,066	25,856	636	-	3,523	8,791
Oregon**	1,197,169	718,982	1,460,517	3,285,750	51,488,589	3,777	937	6,350	523	9,389
Pennsylvania**	205,481	61,896,661	2,864,344	37,346,229	3,940,233	2,417	6,258	6,323	6,104	6,622
Rhode Island**	37,154,728	18,785,539	1,500,762	4,912,271	10,033,194	9,848	6,451	4,401	3,428	48,942
South Carolina	38,751,583	10,899,992	3,666,845	77,869,717	113,433,202	6,691	1,441	6,679	4,832	28,203
South Dakota	13,073	544,645	203,259	6,296,038	279	1,634	1,449	4,235	2,926	35
Tennessee**	3,036	201,822	350,463	0	0	759	1,035	4,172	-	-
Texas*	0	136,991,522	112,548,593	8,593,844	0	-	2,548	10,118	8,263	-
Utah**	3,375,513	2,463,141	4,110,061	721,994	20,107,729	5,169	3,174	8,107	2,028	14,131
Vermont	0	8,384,086	286,561	6,386,241	0	-	2,432	3,411	4,136	-
Virginia**	50,756,208	3,567,239	3,052,375	91,575,066	162,952,734	11,145	1,265	6,294	9,546	24,141
Washington**	73,012	4,035,821	10,769,471	6,581	0	3,651	1,352	5,609	274	-
West Virginia	29,753,367	3,530,125	2,427,862	1,025,340	79,150,145	10,062	851	5,556	230	21,768
Wisconsin**	9,261,498	23,105,082	10,961,286	113,388,167	44,582,311	5,422	6,588	6,079	9,281	19,727
Wyoming	16,699,429	1,109,230	324,269	0	29,518,109	16,716	2,301	7,370	-	36,397

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

- = not applicable; Adult Day = adult day care; FFS = fee-for-service; FFS enrollees = full-benefit enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; HH = home health; Pers Care = personal care; Res Care = residential care.

TABLE A6.5

PHYSICIAN AND OTHER AMBULATORY SERVICE UTILIZATION (FFS ONLY) AMONG FFS ENROLLEES

	Number Using Service								Percentage Using Service							
	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab
United States	**5,811,913**	**5,451,814**	**4,126,414**	**9,981,017**	**16,547,410**	**3,265,917**	**534,062**	**589,874**	**20.7**	**19.4**	**14.7**	**35.6**	**59.0**	**11.6**	**1.9**	**2.1**
Alabama	180,515	122,845	92,973	254,422	484,188	62,758	4,693	4,192	26.3	17.9	13.5	37.1	70.5	9.1	0.7	0.6
Alaska	26,412	37,295	14,172	44,010	77,099	11,782	5,086	1,148	21.2	30.0	11.4	35.4	62.0	9.5	4.1	0.9
Arizona**	34,842	8,724	5,200	63,391	19,557	249	82	237	20.1	5.0	3.0	36.6	11.3	0.1	0.0	0.1
Arkansas	187,217	99,873	120,756	194,580	362,819	49,862	17,627	748	34.3	18.3	22.1	35.7	66.5	9.1	3.2	0.1
California**	560,691	8,648	377,216	779,646	1,287,252	395,275	54,422	56,649	22.6	0.3	15.2	31.4	51.9	15.9	2.2	2.3
Colorado**	129,032	32,403	13,154	56,924	44,287	14,602	549	0	66.8	16.8	6.8	29.5	22.9	7.6	0.3	0.0
Connecticut**	21,211	35,807	40,878	59,440	74,079	22,714	3,272	205	15.9	26.9	30.7	44.6	55.6	17.1	2.5	0.2
Delaware**	1,129	144	3,347	5,208	9,865	736	212	214	6.8	0.9	20.2	31.4	59.5	4.4	1.3	1.3
District of Columbia**	10,920	2,146	5,737	11,774	16,301	6,218	0	3	23.8	4.7	12.5	25.7	35.5	13.5	0.0	0.0
Florida*	211,181	229,279	210,772	482,897	929,638	85,866	50,064	0	13.2	14.3	13.1	30.1	58.0	5.4	3.1	0.0
Georgia	339,049	322,571	137,819	591,327	1,011,927	95,029	34,394	67,241	22.5	21.4	9.1	39.2	67.1	6.3	2.3	4.5
Hawaii**	9,115	4,044	6,127	11,566	33,168	5,593	1,572	14	20.2	8.9	13.5	25.6	73.3	12.4	3.5	0.0
Idaho	42,958	53,657	38,272	65,075	131,155	18,417	7,547	4,815	21.8	27.2	19.4	33.0	66 6	9.4	3.8	2.4
Illinois	217,519	366,287	207,146	592,371	1,049,932	130,664	81,070	45,708	11.4	19.2	10.9	31.1	55.1	6.9	4.3	2.4
Indiana*	154,816	169,013	148,957	213,318	367,213	65,427	35,889	39,447	27.3	29.8	26.3	37.7	64.9	11.6	6.3	7.0
Iowa*	84,111	77,672	69,019	96,743	166,760	17,594	4,059	1,130	32.5	30.1	26.7	37.4	64.5	6.8	1.6	0.4
Kansas*	49,287	29,087	26,752	56,789	112,922	25,296	1,730	2,524	27.3	16.1	14.8	31.4	62.4	14.0	1.0	1.4
Kentucky	141,967	165,406	150,284	293,446	438,938	63,052	2,037	290	23.7	27.6	25.1	49.0	73.3	10.5	0.3	0.0
Louisiana	92,467	193,109	70,966	367,293	727,596	35,046	69,651	4,077	9.2	19.3	7.1	36.7	72.8	3.5	7.0	0.4
Maine	77,740	53,130	54,447	103,022	149,094	13,818	8,777	576	21.7	14.8	15.2	28.7	41.6	3.9	2.4	0.2
Maryland**	7,287	480	16,602	34,258	66,306	13,070	5,640	44	5.0	0.3	11.4	23.4	45.3	8.9	3.9	0.0
Massachusetts*	73,619	195,205	117,781	343,410	483,120	80,670	9,784	46,185	9.0	23.8	14.3	41.8	58.8	9.8	1.2	5.6
Michigan**	42,985	84,504	57,325	162,348	239,609	10,691	9	30	9.1	17.8	12.1	34.3	50.6	2.3	0.0	0.0
Minnesota**	21,036	55,608	50,499	76,714	128,900	45,482	10,363	11,756	9.6	25.5	23.1	35.1	59.1	20.8	4.7	5.4
Mississippi	219,493	154,566	215,130	350,906	480,916	63,399	741	0	30.8	21.7	30.2	49.3	67.5	8.9	0.1	0.0
Missouri*	382,403	101,758	110,474	271,154	280,567	58,931	4,184	20,652	64.1	17.1	18.5	45.5	47.0	9.9	0.7	3.5
Montana	16,019	22,680	20,818	32,620	71,819	15,335	751	0	14.9	21.1	19.3	30.3	66.7	14.2	0.7	0.0
Nebraska	37,777	83,025	70,370	73,319	160,916	28,738	10,477	1,329	17.0	37.3	31.6	32.9	72.2	12.9	4.7	0.6
Nevada**	14,575	18,135	9,683	31,172	17,496	7,066	2,172	6,121	14.6	18.2	9.7	31.2	17.5	7.1	2.2	6.1
New Hampshire	29,999	20,144	10,378	42,161	61,041	18,723	1,163	1,669	28.2	18.9	9.8	39.7	57.4	17.6	1.1	1.6
New Jersey**	24,114	61,747	26,371	103,362	132,749	26,024	0	6,688	8.3	21.2	9.1	35.6	45.7	9.0	0.0	2.3
New Mexico**	12,089	17,108	15,671	51,543	44,546	5,476	2,051	170	10.9	15.4	14.1	46.5	40.2	4.9	1.9	0.2
New York*	533,680	660,752	271,123	1,115,342	1,244,016	434,641	10,830	103,058	18.9	23.3	9.6	39.4	44.0	15.4	0.4	3.6
North Carolina	497,208	329,258	196,887	579,920	991,197	126,224	21,874	0	37.0	24.5	14.6	43.1	73.7	9.4	1.6	0.0
North Dakota	13,343	19,939	14,128	23,771	990	3,743	829	965	18.8	28.1	19.9	33.5	1.4	5.3	1.2	1.4
Ohio*	165,873	358,232	298,778	616,378	925,102	197,359	9,112	87,042	13.1	28.2	23.5	48.5	72.9	15.5	0.7	6.9
Oklahoma*	45,102	56,173	44,097	113,076	194,144	37,783	2,646	0	11.5	14.4	11.3	28.9	49.7	9.7	0.7	0.0
Oregon**	23,641	1,722	24,095	53,560	79,378	13,931	2,384	3,671	13.6	1.0	13.9	30.8	45.7	8.0	1.4	2.1
Pennsylvania**	43,906	92,043	65,223	124,850	269,766	54,787	1,038	2	9.0	18.8	13.3	25.5	55.0	11.2	0.2	0.0
Rhode Island**	5,221	13,027	14,282	21,433	31,541	7,065	0	6,141	10.3	25.8	28.3	42.4	62.5	14.0	0.0	12.2
South Carolina	294,082	209,227	114,789	293,750	509,575	68,365	5,972	4,663	38.2	27.2	14.9	38.1	66.1	8.9	0.8	0.6
South Dakota	35,652	68	37,343	33,568	63,307	9,921	3,447	1,955	31.6	0.1	33.1	29.8	56.2	8.8	3.1	1.7
Tennessee**	3,503	3,313	3,412	11,729	43,971	1,175	112	28	3.4	3.2	3.3	11.4	42.9	1.1	0.1	0.0
Texas*	233,720	519,537	248,318	453,347	1,581,644	656,085	7,998	17,064	10.7	23.8	11.4	20.8	72.4	30.0	0.4	0.8
Utah**	9,499	19,843	11,077	20,772	57,632	2,797	1,950	2,543	9.0	18.7	10.5	19.6	54.4	2.6	1.8	2.4
Vermont	24,489	44,636	16,867	48,534	103,599	19,936	2,046	4	15.5	28.2	10.6	30.6	65.4	12.6	1.3	0.0

TABLE A6.5

PHYSICIAN AND OTHER AMBULATORY SERVICE UTILIZATION (FFS ONLY) AMONG FFS ENROLLEES

	Number Using Service								Percentage Using Service							
	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab
Virginia**	53,516	35,372	33,672	131,539	210,079	29,842	1,762	6,477	16.5	10.9	10.4	40.6	64.9	9.2	0.5	2.0
Washington**	45,520	106,426	64,494	125,651	237,224	15,669	11,231	3,734	11.2	26.2	15.9	31.0	58.4	3.9	2.8	0.9
West Virginia	131,635	66,258	76,140	124,378	194,448	49,161	13,881	19,228	45.4	22.9	26.3	42.9	67.1	17.0	4.8	6.6
Wisconsin**	185,834	75,142	67,033	149,079	102,486	38,213	6,324	5,573	48.3	19.5	17.4	38.8	26.6	9.9	1.6	1.4
Wyoming	12,914	14,746	9,560	24,131	45,536	5,617	558	3,864	19.3	22.0	14.3	36.1	68.1	8.4	0.8	5.8

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

FFS = fee-for-service; FFS enrollees = full-benefit enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; Psych = psychiatric; PT/OT = physical therapy/occupational therapy; Rehab = rehabilitation.

TABLE A6.6

PHYSICIAN AND OTHER AMBULATORY SERVICE EXPENDITURES (FFS ONLY) AMONG FFS ENROLLEES

	Total Expenditures								Expenditures per User							
	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab
United States	**3,343,517,284**	**1,683,015,634**	**425,343,327**	**5,187,770,559**	**6,594,242,729**	**5,206,889,655**	**387,144,276**	**1,822,101,751**	**575**	**309**	**103**	**520**	**399**	**1,594**	**725**	**3,089**
Alabama	78,566,823	37,115,533	8,198,750	84,223,812	193,246,592	185,875,105	2,448,914	6,603,792	435	302	88	331	399	2,962	522	1,575
Alaska	24,394,432	18,377,903	1,851,011	41,050,460	54,784,583	49,485,379	5,992,487	2,498,359	924	493	131	933	711	4,200	1,178	2,176
Arizona**	26,412,346	2,947,492	1,044,651	144,451,948	13,932,886	618,200	49,837	254,829	758	338	201	2,279	712	2,483	608	1,075
Arkansas	151,442,688	25,827,083	13,920,162	41,139,711	177,962,170	130,375,733	34,158,708	2,621,959	809	259	115	211	490	2,615	1,938	3,505
California**	436,870,656	2,261,016	27,586,023	200,480,155	485,434,731	777,174,489	20,813,568	108,657,809	779	261	73	257	377	1,966	382	1,918
Colorado**	64,497,675	10,670,940	1,214,794	21,618,210	9,041,164	2,624,423	357,053	0	500	329	92	380	204	180	650	-
Connecticut**	23,066,500	6,909,192	2,164,436	38,435,868	24,000,005	13,497,138	594,444	69,333	1,087	193	53	647	324	594	182	338
Delaware**	1,668,965	54,165	312,823	2,623,902	4,942,189	5,625,749	152,597	1,290,553	1,478	376	93	504	501	7,644	720	6,031
District of Columbia**	56,851,814	204,484	797,281	6,750,463	8,744,872	13,269,729	0	4,005	5,206	95	139	573	536	2,134	-	1,335
Florida*	137,684,744	52,384,012	17,452,562	240,199,727	389,583,101	72,689,402	57,880,213	0	652	228	83	497	419	847	1,156	-
Georgia	56,434,838	117,714,458	10,525,119	325,396,311	487,503,828	130,182,811	74,008,554	2,717,370	166	365	76	550	482	1,370	2,152	40
Hawaii**	5,239,711	924,421	421,664	8,220,295	17,211,856	2,963,278	320,610	715	575	229	69	711	519	530	204	51
Idaho	17,286,848	18,829,245	4,361,561	48,169,735	51,818,870	44,851,690	4,860,231	3,691,277	402	351	114	740	395	2,435	644	767
Illinois	103,375,109	67,556,872	10,261,789	235,253,855	391,904,639	122,334,896	69,639,208	132,643,827	475	184	50	397	373	936	859	2,902
Indiana*	36,791,878	78,859,224	21,873,396	90,526,981	134,168,662	85,239,068	9,281,590	117,330,901	238	467	147	424	365	1,303	259	2,974
Iowa*	49,627,620	20,901,048	7,060,742	57,060,423	79,787,814	4,304,321	473,786	2,775,149	590	269	102	590	478	245	117	2,456
Kansas*	14,447,648	9,513,354	1,672,319	11,632,912	45,797,901	75,361,639	453,665	4,217,179	293	327	63	205	406	2,979	262	1,671
Kentucky	82,555,387	49,801,012	25,541,167	182,840,696	196,649,083	48,261,048	301,453	98,966	582	301	170	623	448	765	148	341
Louisiana	35,011,910	38,676,976	9,077,801	137,124,335	258,357,899	45,628,647	10,897,542	1,766,411	379	200	128	373	355	1,302	156	433
Maine	78,440,808	13,910,111	6,148,494	140,019,815	48,438,798	57,838,945	6,213,702	14,392,728	1,009	262	113	1,359	325	4,186	708	24,987
Maryland**	1,622,492	77,400	802,340	23,609,372	30,500,035	43,130,126	2,776,445	4,868	223	161	48	689	460	3,300	492	111
Massachusetts*	48,461,521	61,346,039	8,112,103	246,384,634	196,670,908	119,735,304	2,987,023	72,674,157	658	314	69	717	407	1,484	305	1,574
Michigan**	39,832,085	14,370,165	3,298,311	122,494,197	75,349,331	4,411,799	2,241	936	927	170	58	755	314	413	249	31
Minnesota**	13,404,845	16,133,062	6,867,132	33,922,369	78,010,777	460,880,740	6,431,798	180,101,714	637	290	136	442	605	10,133	621	15,320
Mississippi	68,260,977	38,678,034	17,443,422	179,732,161	192,472,676	85,505,507	75,826	0	311	250	81	512	400	1,349	102	-
Missouri*	120,259,117	25,390,030	5,470,771	123,829,600	61,380,681	71,776,993	284,036	51,481,949	314	250	50	457	219	1,218	68	2,493
Montana	6,573,447	7,333,198	5,893,171	18,655,209	33,190,733	50,122,720	183,084	0	410	323	283	572	462	3,269	244	-
Nebraska	9,367,573	22,532,898	9,304,829	36,115,794	68,426,818	31,464,028	10,732,933	2,742,423	248	271	132	493	425	1,095	1,024	2,064
Nevada**	15,712,563	9,996,987	1,035,531	15,399,224	2,639,067	4,017,020	1,221,161	33,835,424	1,078	551	107	494	151	568	562	5,528
New Hampshire	51,025,260	4,287,801	547,257	30,438,325	20,534,499	57,838,243	673,202	4,671,378	1,701	213	53	722	336	3,089	579	2,799
New Jersey**	9,488,188	16,435,859	1,179,773	140,358,567	28,347,969	133,984,890	0	57,330,546	393	266	45	1,358	214	5,149	-	8,572
New Mexico**	5,587,171	9,077,711	1,501,278	40,007,818	17,037,250	6,518,330	809,970	21,739	462	531	96	776	382	1,190	395	128
New York*	538,771,235	317,979,062	13,207,392	709,386,207	299,435,071	923,641,297	1,791,110	542,489,690	1,010	481	49	636	241	2,125	165	5,264
North Carolina	338,081,997	113,557,669	17,712,734	335,754,070	491,189,484	154,991,603	23,800,215	0	680	345	90	579	496	1,228	1,088	-
North Dakota	3,649,310	6,147,908	1,088,254	19,410,263	129,791	2,247,321	571,196	6,340,402	273	308	77	817	131	600	689	6,570
Ohio*	87,733,866	93,849,236	26,547,477	310,395,567	397,221,707	359,454,058	7,734,443	297,174,159	529	262	89	504	429	1,821	849	3,414
Oklahoma*	35,087,820	21,656,458	4,162,943	28,964,532	54,897,351	35,876,277	3,732,257	0	778	386	94	256	283	950	1,411	-
Oregon**	12,242,637	281,745	9,217,859	51,532,437	31,538,268	38,676,401	1,055,828	2,361,900	518	164	383	962	397	2,776	443	643
Pennsylvania**	17,706,141	20,595,042	16,850,185	36,631,740	64,002,336	74,316,289	486,459	134	403	224	258	293	237	1,356	469	67
Rhode Island**	2,355,608	2,788,676	761,361	12,145,783	9,033,037	20,568,436	0	46,045,889	451	214	53	567	286	2,911	-	7,498
South Carolina	145,055,148	68,880,333	7,774,892	71,276,981	217,418,664	120,377,789	3,793,596	16,179,958	493	329	68	243	427	1,761	635	3,470
South Dakota	27,788,818	23,262	3,637,231	22,286,599	24,634,190	14,228,194	2,156,850	20,613,098	779	342	97	664	389	1,434	626	10,544
Tennessee**	205,762	1,024,888	203,109	5,053,798	17,946,262	136,373	5,498	4,035	59	309	60	431	408	116	49	144
Texas*	63,860,580	134,641,762	25,849,702	126,359,646	712,192,211	239,632,597	4,576,652	51,684,561	273	259	104	279	450	365	572	3,029
Utah**	5,135,883	4,775,613	683,943	10,451,879	22,172,873	2,759,895	302,543	993,124	541	241	62	503	385	987	155	391
Vermont	7,466,524	11,845,038	5,750,464	33,660,498	37,065,015	54,214,058	516,083	16,443	305	265	341	694	358	2,719	252	4,111
Virginia**	24,761,933	9,384,697	2,186,510	79,872,252	75,454,417	103,773,386	100,587	14,522,955	463	265	65	607	359	3,477	57	2,242

TABLE A6.6

PHYSICIAN AND OTHER AMBULATORY SERVICE EXPENDITURES (FFS ONLY) AMONG FFS ENROLLEES

	Total Expenditures								Expenditures per User							
	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab
Washington**	40,584,028	34,251,171	7,621,846	110,118,505	117,794,597	4,883,266	4,473,723	1,022,712	892	322	118	876	497	312	398	274
West Virginia	41,053,501	22,872,493	19,898,130	59,851,922	92,954,180	75,506,599	2,950,336	6,125,205	312	345	261	481	478	1,536	213	319
Wisconsin**	73,611,144	14,596,587	28,552,133	87,939,636	26,574,464	38,477,401	3,978,873	9,394,106	396	194	426	590	259	1,007	629	1,686
Wyoming	8,101,710	4,766,269	694,699	8,511,360	24,716,424	5,541,025	42,146	2,633,084	627	323	73	353	543	986	76	681

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

- = not applicable; FFS = fee-for-service; FFS enrollees = full-benefit enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; Psych = psychiatric; PT/OT = physical therapy/occupational therapy; Rehab = rehabilitation.

TABLE A6.7

LAB/X-RAY, SUPPLIES, AND OTHER WRAPAROUND SERVICE UTILIZATION (FFS ONLY) AMONG FFS ENROLLEES

	Number Using Service					Percentage Using Service				
	DME	Lab/ X-ray	Other Services	Targeted Case Management	Trans- portation	DME	Lab/ X-ray	Other Services	Targeted Case Management	Trans- portation
United States	**6,590,750**	**12,936,026**	**3,849,544**	**1,527,168**	**2,782,609**	**23.5**	**46.1**	**13.7**	**5.4**	**9.9**
Alabama	121,375	401,831	32,465	30,471	36,600	17.7	58.5	4.7	4.4	5.3
Alaska	25,122	53,083	3,944	3,869	20,271	20.2	42.7	3.2	3.1	16.3
Arizona**	11,906	20,667	15,371	0	13,828	6.9	11.9	8.9	0.0	8.0
Arkansas	113,703	257,641	45,983	12,442	371,620	20.8	47.2	8.4	2.3	68.1
California**	797,344	797,131	399,999	211,258	225,496	32.2	32.1	16.1	8.5	9.1
Colorado**	53,341	97,843	20,714	0	20,071	27.6	50.6	10.7	0.0	10.4
Connecticut**	54,167	74,127	12,838	7,239	28,419	40.7	55.7	9.6	5.4	21.3
Delaware**	1,559	6,579	3,938	0	4,125	9.4	39.7	23.7	0.0	24.9
District of Columbia**	12,485	21,442	11,556	127	9,792	27.2	46.7	25.2	0.3	21.3
Florida*	338,129	747,788	509,799	75,347	180,545	21.1	46.6	31.8	4.7	11.3
Georgia	312,042	652,131	51,605	110,316	73,311	20.7	43.3	3.4	7.3	4.9
Hawaii**	12,708	23,254	8,528	1,069	4,753	28.1	51.4	18.9	2.4	10.5
Idaho	36,092	96,520	17,695	5,952	13,532	18.3	49.0	9.0	3.0	6.9
Illinois	266,331	861,048	102,828	549,670	159,959	14.0	45.2	5.4	28.8	8.4
Indiana*	148,467	296,173	68,131	4,268	69,634	26.2	52.3	12.0	0.8	12.3
Iowa*	69,651	133,000	27,861	8,986	9,823	27.0	51.5	10.8	3.5	3.8
Kansas*	31,407	86,728	21,437	12,673	15,664	17.4	48.0	11.9	7.0	8.7
Kentucky	182,144	315,761	218,226	11,965	53,178	30.4	52.7	36.4	2.0	8.9
Louisiana	258,857	553,999	292,215	10,091	91,281	25.9	55.4	29.2	1.0	9.1
Maine	64,086	118,783	42,726	30,534	38,806	17.9	33.1	11.9	8.5	10.8
Maryland**	19,524	52,773	8,957	1,572	10,436	13.4	36.1	6.1	1.1	7.1
Massachusetts*	175,186	419,701	59,654	18,183	97,727	21.3	51.1	7.3	2.2	11.9
Michigan**	92,989	108,717	35,013	36,120	14,860	19.6	22.9	7.4	7.6	3.1
Minnesota**	64,471	90,266	42,329	41,776	27,342	29.5	41.4	19.4	19.1	12.5
Mississippi	196,558	368,860	29,780	0	63,593	27.6	51.8	4.2	0.0	8.9
Missouri*	177,941	302,151	130,119	25,826	43,138	29.8	50.6	21.8	4.3	7.2
Montana	27,505	49,978	30,441	6,379	6,466	25.5	46.4	28.3	5.9	6.0
Nebraska	71,119	123,242	23,177	3,534	6,655	31.9	55.3	10.4	1.6	3.0
Nevada**	8,035	59,714	13,662	9,637	7,788	8.0	59.8	13.7	9.6	7.8
New Hampshire	26,884	51,103	9,344	1,011	5,638	25.3	48.1	8.8	1.0	5.3
New Jersey**	79,388	111,667	46,817	53	44,581	27.3	38.4	16.1	0.0	15.3
New Mexico**	25,787	33,778	15,142	2,376	11,610	23.3	30.5	13.7	2.1	10.5
New York*	533,938	1,001,458	540,574	11,830	308,632	18.9	35.4	19.1	0.4	10.9
North Carolina	390,796	782,675	129,313	27,847	98,506	29.1	58.2	9.6	2.1	7.3

TABLE A6.7

LAB/X-RAY, SUPPLIES, AND OTHER WRAPAROUND SERVICE UTILIZATION (FFS ONLY) AMONG FFS ENROLLEES

	Number Using Service					Percentage Using Service				
	DME	Lab/ X-ray	Other Services	Targeted Case Management	Trans-portation	DME	Lab/ X-ray	Other Services	Targeted Case Management	Trans-portation
North Dakota	24,740	29,104	44,357	2,556	7,617	34.9	41.1	62.6	3.6	10.7
Ohio*	286,879	646,450	215,176	10,111	121,780	22.6	50.9	16.9	0.8	9.6
Oklahoma*	76,628	128,032	49,898	28,243	14,498	19.6	32.8	12.8	7.2	3.7
Oregon**	49,031	70,959	20,917	10,372	21,731	28.2	40.8	12.0	6.0	12.5
Pennsylvania**	43,815	192,116	60,268	3,029	14,986	8.9	39.2	12.3	0.6	3.1
Rhode Island**	13,485	26,004	10,664	1,283	7,239	26.7	51.5	21.1	2.5	14.3
South Carolina	132,717	376,126	17,739	38,196	51,375	17.2	48.8	2.3	5.0	6.7
South Dakota	26,218	53,125	11,122	0	9,129	23.3	47.1	9.9	0.0	8.1
Tennessee**	4,661	29,926	3,634	0	2,256	4.5	29.2	3.5	0.0	2.2
Texas*	733,746	1,454,232	142,682	128,777	191,293	33.6	66.6	6.5	5.9	8.8
Utah**	16,611	43,088	6,831	2,637	3,594	15.7	40.6	6.4	2.5	3.4
Vermont	23,687	67,565	24,005	2	13,496	15.0	42.6	15.2	0.0	8.5
Virginia**	55,612	129,226	45,695	1,715	22,150	17.2	39.9	14.1	0.5	6.8
Washington**	135,528	158,890	69,724	1	20,943	33.4	39.1	17.2	0.0	5.2
West Virginia	54,263	167,583	11,077	6,042	36,724	18.7	57.9	3.8	2.1	12.7
Wisconsin**	93,329	158,103	77,335	20,909	52,459	24.3	41.1	20.1	5.4	13.6
Wyoming	18,763	33,885	16,239	874	3,659	28.1	50.7	24.3	1.3	5.5

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

DME = durable medical equipment; FFS = fee-for-service; FFS enrollees = full-benefit enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002.

TABLE A6.8

LAB/X-RAY, SUPPLIES, AND OTHER WRAPAROUND SERVICE EXPENDITURES (FFS ONLY) AMONG FFS ENROLLEES

	Total Expenditures					Expenditures per User				
	DME	Lab/X-ray	Other Services	Targeted Case Management	Trans-portation	DME	Lab/X-ray	Other Services	Targeted Case Management	Trans-portation
United States	**2,516,809,700**	**3,365,370,777**	**8,590,321,139**	**1,267,699,518**	**1,348,165,505**	**382**	**260**	**2,232**	**830**	**484**
Alabama	38,551,041	126,375,235	35,458,482	50,480,620	11,738,456	318	314	1,092	1,657	321
Alaska	14,599,219	20,181,980	14,791,729	6,775,015	35,266,578	581	380	3,750	1,751	1,740
Arizona**	12,767,852	34,125,860	6,888,468	0	20,674,051	1,072	1,651	448	-	1,495
Arkansas	47,384,080	58,179,601	71,085,368	3,675,917	14,859,068	417	226	1,546	295	40
California**	266,776,250	237,305,464	167,800,506	271,058,310	148,957,924	335	298	420	1,283	661
Colorado**	42,464,981	24,990,202	304,181,222	0	8,565,495	796	255	14,685	-	427
Connecticut**	14,080,175	28,847,917	47,887,518	13,593,797	11,036,227	260	389	3,730	1,878	388
Delaware**	955,765	1,075,876	42,430,313	0	2,452,745	613	164	10,775	-	595
District of Columbia**	12,598,391	17,899,025	35,096,883	56,725	16,416,755	1,009	835	3,037	447	1,677
Florida*	141,596,893	133,140,202	360,205,270	60,766,423	86,271,182	419	178	707	806	478
Georgia	83,611,033	201,062,845	159,519,119	54,665,385	23,322,464	268	308	3,091	496	318
Hawaii**	6,337,505	3,903,277	45,358,569	6,631,202	2,762,860	499	168	5,319	6,203	581
Idaho	10,601,790	17,386,482	70,862,251	7,669,133	11,521,371	294	180	4,005	1,288	851
Illinois	91,732,322	164,921,377	463,265,926	85,343,561	89,598,457	344	192	4,505	155	560
Indiana*	67,533,923	78,657,983	107,031,448	723,923	31,472,774	455	266	1,571	170	452
Iowa*	25,598,002	38,606,321	71,056,029	18,232,738	1,559,384	368	290	2,550	2,029	159
Kansas*	11,776,995	15,857,705	20,980,070	16,858,463	7,484,249	375	183	979	1,330	478
Kentucky	72,990,557	116,173,670	244,942,213	14,463,950	20,764,663	401	368	1,122	1,209	390
Louisiana	66,840,797	149,860,705	174,902,372	13,793,521	37,763,013	258	271	599	1,367	414
Maine	91,805,134	32,544,758	294,388,038	81,754,267	20,932,523	1,433	274	6,890	2,677	539
Maryland**	12,614,128	15,379,942	11,558,445	434,166	1,563,852	646	291	1,290	276	150
Massachusetts*	54,735,500	120,146,506	264,597,940	33,527,939	83,593,883	312	286	4,436	1,844	855
Michigan**	85,606,851	10,367,837	6,882,466	22,948,458	4,458,758	921	95	197	635	300
Minnesota**	42,252,805	31,999,379	72,993,983	84,079,713	33,030,840	655	355	1,724	2,013	1,208
Mississippi	49,502,132	40,921,321	95,375,823	0	38,584,856	252	111	3,203	-	607
Missouri*	85,619,594	97,383,065	275,296,435	37,335,841	9,638,075	481	322	2,116	1,446	223
Montana	11,630,614	12,750,744	35,007,218	3,998,878	2,483,953	423	255	1,150	627	384
Nebraska	27,012,628	38,218,064	120,793,005	6,231,846	4,042,072	380	310	5,212	1,763	607
Nevada**	260,846	60,304,858	44,860,475	17,918,140	4,161,554	32	1,010	3,284	1,859	534
New Hampshire	10,534,142	15,703,412	135,238,299	1,426,176	3,245,323	392	307	14,473	1,411	576
New Jersey**	48,384,615	58,072,673	345,255,782	63,200	46,680,475	609	520	7,375	1,192	1,047
New Mexico**	12,463,940	7,278,803	104,766,355	3,337,429	9,764,675	483	215	6,919	1,405	841
New York*	158,637,737	128,202,154	531,720,789	9,541,071	247,655,931	297	128	984	807	802
North Carolina	123,489,685	202,647,611	570,972,214	57,479,816	18,937,966	316	259	4,415	2,064	192

TABLE A6.8

LAB/X-RAY, SUPPLIES, AND OTHER WRAPAROUND SERVICE EXPENDITURES (FFS ONLY) AMONG FFS ENROLLEES

	Total Expenditures					Expenditures per User				
	DME	Lab/X-ray	Other Services	Targeted Case Management	Trans-portation	DME	Lab/X-ray	Other Services	Targeted Case Management	Trans-portation
North Dakota	5,076,930	6,816,691	72,566,813	2,120,914	2,183,298	205	234	1,636	830	287
Ohio*	60,052,720	229,839,655	694,475,043	11,235,773	58,396,223	209	356	3,227	1,111	480
Oklahoma*	32,046,051	12,832,062	159,494,050	32,218,268	6,502,503	418	100	3,196	1,141	449
Oregon**	25,865,822	33,921,121	95,663,865	16,327,371	13,335,712	528	478	4,573	1,574	614
Pennsylvania**	19,034,820	34,681,443	163,223,203	2,237,285	2,558,603	434	181	2,708	739	171
Rhode Island**	10,893,468	9,521,204	15,272,656	1,551,078	1,759,194	808	366	1,432	1,209	243
South Carolina	51,225,079	56,584,288	49,431,418	65,163,211	17,792,909	386	150	2,787	1,706	346
South Dakota	6,639,192	11,336,108	61,480,873	0	3,639,461	253	213	5,528	-	399
Tennessee**	941,539	5,368,586	832,378	0	454,289	202	179	229	-	201
Texas*	246,757,674	439,637,334	1,245,608,471	133,306,677	59,791,077	336	302	8,730	1,035	313
Utah**	7,344,527	13,592,131	11,109,483	4,529,122	1,273,666	442	315	1,626	1,718	354
Vermont	6,087,465	16,932,597	170,008,707	524	5,062,395	257	251	7,082	262	375
Virginia**	34,450,956	19,931,239	57,108,247	339,746	4,043,674	619	154	1,250	198	183
Washington**	94,221,500	52,303,796	46,423,500	166	6,531,322	695	329	666	166	312
West Virginia	21,505,409	46,731,395	75,836,480	1,956,061	25,013,027	396	279	6,846	324	681
Wisconsin**	44,953,460	26,683,440	294,784,101	11,199,199	27,229,231	482	169	3,812	536	519
Wyoming	6,365,166	8,184,833	23,550,828	648,500	1,336,469	339	242	1,450	742	365

SOURCE: Medicaid Analytic Extract 2002.

**FFS enrollees represent less than 50 percent of all full-benefit enrollees in this state.

*FFS enrollees represent less than 75 percent of all full-benefit enrollees in this state.

- = not applicable; DME = durable medical equipment; FFS = fee-for-service; FFS enrollees = full-benefit enrollees who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002.

TABLE A6.9

INSTITUTIONAL LONG-TERM CARE UTILIZATION (FFS ONLY) AMONG FFS DUALS

	Number Using Service				Percentage Using Service			
	ICF/MR	Inp Psych < Age 21	MH Aged	NF	ICF/MR	Inp Psych < Age 21	MH Aged	NF
United States	**66,643**	**3,202**	**15,173**	**1,301,499**	**1.1**	**0.1**	**0.2**	**21.0**
Alabama	369	0	535	23,868	0.4	0.0	0.5	22.9
Alaska	0	3	6	727	0.0	0.0	0.1	6.4
Arizona**	0	0	0	620	0.0	0.0	0.0	1.9
Arkansas	916	343	0	17,484	1.2	0.5	0.0	23.1
California	4,556	9	4	94,344	0.5	0.0	0.0	11.1
Colorado	75	0	30	12,822	0.2	0.0	0.1	26.8
Connecticut	1,039	206	369	27,210	1.3	0.3	0.5	34.7
Delaware	176	0	14	3,220	1.8	0.0	0.1	33.4
District of Columbia	283	3	56	3,261	1.7	0.0	0.3	19.1
Florida	2,040	0	148	70,519	0.6	0.0	0.0	19.3
Georgia	768	0	0	36,965	0.5	0.0	0.0	22.4
Hawaii	164	0	0	10,968	0.6	0.0	0.0	42.0
Idaho	317	6	42	4,606	1.6	0.0	0.2	22.7
Illinois	6,501	26	878	62,528	1.8	0.0	0.2	17.4
Indiana	3,527	8	111	37,368	3.1	0.0	0.1	32.4
Iowa	1,318	2	7	19,090	2.2	0.0	0.0	31.9
Kansas*	448	3	176	9,610	1.3	0.0	0.5	28.1
Kentucky	561	9	124	23,219	0.6	0.0	0.1	23.4
Louisiana	3,177	38	2,435	28,896	2.8	0.0	2.2	25.5
Maine	178	7	10	7,997	0.2	0.0	0.0	8.8
Maryland	305	1	48	19,828	0.4	0.0	0.1	25.1
Massachusetts	999	2,288	22	48,482	0.5	1.1	0.0	23.8
Michigan	106	2	115	40,522	0.1	0.0	0.1	21.1
Minnesota*	1,842	6	17	11,122	2.3	0.0	0.0	14.1
Mississippi	1,406	5	191	18,125	1.0	0.0	0.1	12.5
Missouri	934	2	5	34,988	0.6	0.0	0.0	22.6
Montana	96	0	84	4,840	0.6	0.0	0.5	28.0
Nebraska	480	1	8	10,654	1.3	0.0	0.0	29.7
Nevada	101	3	97	4,029	0.5	0.0	0.5	20.5
New Hampshire	0	6	0	6,909	0.0	0.0	0.0	34.0
New Jersey	2,405	9	329	38,031	1.6	0.0	0.2	25.4
New Mexico	161	11	40	6,089	0.5	0.0	0.1	19.3
New York	6,063	97	4,690	128,283	1.0	0.0	0.8	21.5
North Carolina	2,614	10	271	42,448	1.1	0.0	0.1	17.1
North Dakota	422	0	23	5,066	3.1	0.0	0.2	36.8
Ohio	5,467	2	49	72,346	2.5	0.0	0.0	33.2
Oklahoma	1,331	5	220	21,471	1.5	0.0	0.2	24.3
Oregon*	36	1	59	6,779	0.1	0.0	0.1	16.1
Pennsylvania**	1,631	16	387	70,110	1.2	0.0	0.3	49.7
Rhode Island	15	0	34	10,529	0.0	0.0	0.1	34.4
South Carolina	1,292	28	292	16,278	1.0	0.0	0.2	12.9
South Dakota	120	1	62	5,477	0.9	0.0	0.4	38.9
Tennessee**	0	0	0	2,085	0.0	0.0	0.0	22.5
Texas	7,968	15	2,412	84,285	2.1	0.0	0.6	22.1
Utah**	470	1	11	4,162	4.4	0.0	0.1	39.4
Vermont	9	0	3	3,441	0.0	0.0	0.0	11.3
Virginia	1,365	6	456	24,136	1.3	0.0	0.4	22.4
Washington	45	0	120	19,015	0.0	0.0	0.1	17.4
West Virginia	357	5	0	10,045	0.7	0.0	0.0	20.4
Wisconsin	2,109	17	182	34,361	1.2	0.0	0.1	19.7
Wyoming	81	1	1	2,241	1.2	0.0	0.0	34.4

SOURCE: Medicaid Analytic Extract 2002.

**FFS duals represent less than 50 percent of all full-benefit duals in this state.

*FFS duals represent less than 75 percent of all full-benefit duals in this state.

FFS = fee-for-service; FFS duals = full-benefit duals who never enrolled in Medicaid HMOs/HIOs in 2002; ICF/MR = intermediate care facility for the mentally retarded; Inp Psych = inpatient psychiatric; MH = mental hospital; NF = nursing facility.

TABLE A6.10

INSTITUTIONAL LONG-TERM CARE EXPENDITURES (FFS ONLY) AMONG FFS DUALS

	Total Expenditures				Expenditures per User			
	ICF/MR	Inp Psych < Age 21	MH Aged	NF	ICF/MR	Inp Psych < Age 21	MH Aged	NF
United States	**6,211,919,732**	**19,601,193**	**303,266,121**	**33,300,955,422**	**93,212**	**6,122**	**19,987**	**25,587**
Alabama	41,275,926	0	23,163,320	616,553,443	111,859	-	43,296	25,832
Alaska	0	77,363	10,926	52,025,462	-	25,788	1,821	71,562
Arizona**	0	0	0	12,560,327	-	-	-	20,259
Arkansas	57,047,550	364,172	0	374,923,069	62,279	1,062	-	21,444
California	346,485,633	391,585	46,020	2,225,323,493	76,050	43,509	11,505	23,587
Colorado	9,032,451	0	2,349,491	330,018,145	120,433	-	78,316	25,738
Connecticut	188,036,199	158,296	2,195,669	951,055,584	180,978	768	5,950	34,952
Delaware	19,187,687	0	1,181,789	128,755,797	109,021	-	84,414	39,986
District of Columbia	25,916,533	118,462	2,286,484	126,944,662	91,578	39,487	40,830	38,928
Florida	184,048,074	0	5,617,824	1,755,147,186	90,220	-	37,958	24,889
Georgia	69,464,187	0	0	742,326,470	90,448	-	-	20,082
Hawaii	4,967,221	0	0	153,735,003	30,288	-	-	14,017
Idaho	25,970,501	154,354	246,197	110,895,237	81,926	25,726	5,862	24,076
Illinois	380,308,891	421,943	18,307,405	1,198,184,224	58,500	16,229	20,851	19,162
Indiana	229,036,345	49,226	4,123,755	758,127,571	64,938	6,153	37,151	20,288
Iowa	117,604,606	6,902	520,853	371,028,399	89,230	3,451	74,408	19,436
Kansas*	36,519,877	50,951	3,230,173	176,279,830	81,518	16,984	18,353	18,343
Kentucky	60,610,108	28,320	275,155	521,440,409	108,039	3,147	2,219	22,457
Louisiana	197,843,259	113,570	3,557,140	496,623,760	62,274	2,989	1,461	17,187
Maine	19,861,760	45,290	267,634	192,452,121	111,583	6,470	26,763	24,066
Maryland	39,454,293	91,413	4,212,382	655,529,477	129,358	91,413	87,758	33,061
Massachusetts	171,595,043	11,855,446	1,821,451	1,429,617,505	171,767	5,182	82,793	29,488
Michigan	12,771,132	156,564	7,424,392	1,042,391,892	120,482	78,282	64,560	25,724
Minnesota*	136,215,867	299,757	708,783	235,896,505	73,950	49,960	41,693	21,210
Mississippi	89,810,369	8,685	174,120	406,603,631	63,877	1,737	912	22,433
Missouri	77,821,575	24,448	74,765	648,733,970	83,321	12,224	14,953	18,542
Montana	10,967,379	0	3,097,863	97,089,677	114,244	-	36,879	20,060
Nebraska	35,029,190	13,575	239,689	257,502,096	72,977	13,575	29,961	24,170
Nevada	9,440,816	22,058	87,205	92,210,160	93,473	7,353	899	22,887
New Hampshire	0	286,876	0	186,059,371	-	47,813	-	26,930
New Jersey	310,815,068	176,569	14,504,756	1,121,601,321	129,237	19,619	44,087	29,492
New Mexico	10,246,638	95,048	62,873	147,235,440	63,644	8,641	1,572	24,181
New York	1,374,310,493	2,671,060	106,714,624	5,083,028,830	226,672	27,537	22,754	39,624
North Carolina	238,664,520	20,775	6,730,355	870,082,619	91,302	2,078	24,835	20,498
North Dakota	31,889,553	0	1,017,306	138,996,401	75,568	-	44,231	27,437
Ohio	396,316,416	8,373	59,660	2,251,783,269	72,492	4,187	1,218	31,125
Oklahoma	64,780,960	6,902	381,320	396,838,958	48,671	1,380	1,733	18,483
Oregon*	7,144,732	68,920	4,565,383	120,563,285	198,465	68,920	77,379	17,785
Pennsylvania**	220,039,391	686,763	35,846,197	2,166,432,314	134,911	42,923	92,626	30,900
Rhode Island	2,464,709	0	154,200	418,246,677	164,314	-	4,535	39,723
South Carolina	95,040,921	180,628	13,172,824	334,014,498	73,561	6,451	45,112	20,519
South Dakota	10,075,676	23,727	3,072,760	106,287,046	83,964	23,727	49,561	19,406
Tennessee**	0	0	0	13,754,010	-	-	-	6,597
Texas	489,789,095	107,446	7,761,386	1,611,321,792	61,470	7,163	3,218	19,118
Utah**	27,995,527	44,173	1,060,986	80,124,432	59,565	44,173	96,453	19,251
Vermont	1,074,927	0	204,401	79,600,740	119,436	-	68,134	23,133
Virginia	137,344,180	10,882	18,442,584	483,547,127	100,618	1,814	40,444	20,034
Washington	2,826,426	0	464,873	438,033,733	62,809	-	3,874	23,036
West Virginia	31,861,562	14,034	0	282,722,064	89,248	2,807	-	28,146
Wisconsin	155,034,153	738,753	3,720,867	759,976,007	73,511	43,456	20,444	22,117
Wyoming	7,882,313	7,884	108,281	50,730,383	97,313	7,884	108,281	22,637

SOURCE: Medicaid Analytic Extract 2002.

**FFS duals represent less than 50 percent of all full-benefit duals in this state.

*FFS duals represent less than 75 percent of all full-benefit duals in this state.

- = not applicable; FFS = fee-for-service; FFS duals = full-benefit duals who never enrolled in Medicaid HMOs/HIOs in 2002;
ICF/MR = intermediate care facility for the mentally retarded; Inp Psych = inpatient psychiatric; MH = mental hospital; NF = nursing facility.

TABLE A6.11

COMMUNITY-BASED LONG-TERM CARE UTILIZATION (FFS ONLY) AMONG FFS DUALS

	Number Using Service					Percentage Using Service				
	Adult Day	HH	Hospice	Pers Care	Res Care	Adult Day	HH	Hospice	Pers Care	Res Care
United States	**147,555**	**293,680**	**61,247**	**298,702**	**294,186**	**2.4**	**4.7**	**1.0**	**4.8**	**4.7**
Alabama	202	24,402	1,680	0	1,393	0.2	23.4	1.6	0.0	1.3
Alaska	382	22	1	2,098	881	3.3	0.2	0.0	18.4	7.7
Arizona**	1	110	0	552	1	0.0	0.3	0.0	1.7	0.0
Arkansas	1,956	2,843	112	13,976	113	2.6	3.8	0.1	18.4	0.1
California	33,675	1,541	76	681	193,470	4.0	0.2	0.0	0.1	22.9
Colorado	703	4,068	1,851	0	2,666	1.5	8.5	3.9	0.0	5.6
Connecticut	3,926	14,072	2	10,053	2,728	5.0	18.0	0.0	12.8	3.5
Delaware	465	630	153	0	518	4.8	6.5	1.6	0.0	5.4
District of Columbia	410	1,061	45	66	0	2.4	6.2	0.3	0.4	0.0
Florida	6,458	7,136	9,583	11	16,208	1.8	2.0	2.6	0.0	4.4
Georgia	4,931	10,921	3,098	0	3,562	3.0	6.6	1.9	0.0	2.2
Hawaii	0	2,674	14	0	0	0.0	10.2	0.1	0.0	0.0
Idaho	185	334	60	3,800	2,270	0.9	1.6	0.3	18.8	11.2
Illinois	1,120	836	3,802	7,883	122	0.3	0.2	1.1	2.2	0.0
Indiana	1,851	2,587	2,159	2	2,178	1.6	2.2	1.9	0.0	1.9
Iowa	986	10,667	0	0	3,292	1.6	17.8	0.0	0.0	5.5
Kansas*	2,656	1,654	1,078	9,468	2,538	7.8	4.8	3.2	27.7	7.4
Kentucky	2,436	8,779	1,862	0	1,029	2.5	8.8	1.9	0.0	1.0
Louisiana	505	1,237	1,790	105	0	0.4	1.1	1.6	0.1	0.0
Maine	1,536	709	13	2,615	3,975	1.7	0.8	0.0	2.9	4.4
Maryland	3,776	6,073	828	3,505	0	4.8	7.7	1.0	4.4	0.0
Massachusetts	8,742	14,231	2,080	2,968	9,804	4.3	7.0	1.0	1.5	4.8
Michigan	0	297	56	0	3,158	0.0	0.2	0.0	0.0	1.6
Minnesota*	5,924	16,560	526	9,547	413	7.5	20.9	0.7	12.1	0.5
Mississippi	289	4,947	691	18	91	0.2	3.4	0.5	0.0	0.1
Missouri	1,162	174	144	33,711	5,206	0.8	0.1	0.1	21.8	3.4
Montana	591	138	73	1,988	495	3.4	0.8	0.4	11.5	2.9
Nebraska	618	1,582	647	929	197	1.7	4.4	1.8	2.6	0.5
Nevada	0	227	425	2,135	0	0.0	1.2	2.2	10.8	0.0
New Hampshire	1,336	466	0	128	326	6.6	2.3	0.0	0.6	1.6
New Jersey	8,289	6,189	2,345	16,085	2,362	5.5	4.1	1.6	10.8	1.6
New Mexico	961	103	416	5,511	0	3.1	0.3	1.3	17.5	0.0
New York	34,728	101,983	3,888	81,157	17,707	5.8	17.1	0.7	13.6	3.0
North Carolina	292	18,155	1,973	32,871	1,241	0.1	7.3	0.8	13.3	0.5
North Dakota	12	412	191	0	63	0.1	3.0	1.4	0.0	0.5
Ohio	2,119	8,809	6,118	0	7	1.0	4.0	2.8	0.0	0.0
Oklahoma	1,861	1,181	0	10,234	49	2.1	1.3	0.0	11.6	0.1
Oregon*	305	79	49	5,722	5,174	0.7	0.2	0.1	13.6	12.3
Pennsylvania**	0	4,973	39	4,383	221	0.0	3.5	0.0	3.1	0.2
Rhode Island	2,354	1,886	267	1,189	6	7.7	6.2	0.9	3.9	0.0
South Carolina	4,269	1,464	95	13,134	2,251	3.4	1.2	0.1	10.4	1.8
South Dakota	8	19	38	1,578	1	0.1	0.1	0.3	11.2	0.0
Tennessee**	0	17	50	0	0	0.0	0.2	0.5	0.0	0.0
Texas	0	591	9,277	861	0	0.0	0.2	2.4	0.2	0.0
Utah**	262	257	411	311	273	2.5	2.4	3.9	2.9	2.6
Vermont	0	1,600	60	17	0	0.0	5.2	0.2	0.1	0.0
Virginia	2,850	432	164	8,215	4,733	2.6	0.4	0.2	7.6	4.4
Washington	14	383	1,358	18	0	0.0	0.4	1.2	0.0	0.0
West Virginia	1,264	2,176	183	2,934	1,085	2.6	4.4	0.4	6.0	2.2
Wisconsin	464	1,901	1,469	8,243	1,809	0.3	1.1	0.8	4.7	1.0
Wyoming	681	92	7	0	570	10.4	1.4	0.1	0.0	8.7

SOURCE: Medicaid Analytic Extract 2002.

**FFS duals represent less than 50 percent of all full-benefit duals in this state.

*FFS duals represent less than 75 percent of all full-benefit duals in this state.

Adult Day = adult day care; FFS = fee-for-service; FFS duals = full-benefit duals who never enrolled in Medicaid HMOs/HIOs in 2002; HH = home health; Pers Care = personal care; Res Care = residential care.

TABLE A6.12

COMMUNITY-BASED LONG-TERM CARE EXPENDITURES (FFS ONLY) AMONG FFS DUALS

	Total Expenditures					Expenditures per User				
	Adult Day	HH	Hospice	Pers Care	Res Care	Adult Day	HH	Hospice	Pers Care	Res Care
United States	**1,603,328,566**	**1,525,838,750**	**474,735,414**	**2,900,533,505**	**4,375,518,965**	**10,866**	**5,196**	**7,751**	**9,710**	**14,873**
Alabama	416,677	14,027,458	16,380,120	0	50,075,579	2,063	575	9,750	-	35,948
Alaska	3,278,331	66,869	13,752	27,982,664	29,184,360	8,582	3,040	13,752	13,338	33,126
Arizona**	23,232	205,031	0	2,665,620	7,348	23,232	1,864	-	4,829	7,348
Arkansas	10,631,062	4,798,481	395,607	51,396,994	104,220	5,435	1,688	3,532	3,678	922
California	232,011,836	7,569,321	3,543	416,763	1,501,240,567	6,890	4,912	47	612	7,760
Colorado	3,125,769	39,801,497	12,358,661	0	18,937,794	4,446	9,784	6,677	-	7,103
Connecticut	52,676,296	112,215,053	4,341	67,797,886	208,403,876	13,417	7,974	2,171	6,744	76,394
Delaware	3,222,719	4,496,472	1,508,462	0	10,536,768	6,931	7,137	9,859	-	20,341
District of Columbia	2,882,929	11,808,782	187,744	109,216	0	7,032	11,130	4,172	1,655	-
Florida	38,697,754	26,451,835	82,034,796	122,542	154,372,886	5,992	3,707	8,560	11,140	9,524
Georgia	40,054,653	58,511,054	21,650,984	0	32,459,892	8,123	5,358	6,989	-	9,113
Hawaii	0	12,018,220	136,514	0	0	-	4,494	9,751	-	-
Idaho	356,319	981,685	468,899	33,033,672	17,277,892	1,926	2,939	7,815	8,693	7,611
Illinois	3,799,659	1,095,255	20,276,282	54,494,648	1,074,493	3,393	1,310	5,333	6,913	8,807
Indiana	5,854,643	21,329,566	13,606,779	49	82,849,783	3,163	8,245	6,302	25	38,039
Iowa	3,503,044	38,979,406	0	0	76,413,495	3,553	3,654	-	-	23,212
Kansas*	30,055,089	12,988,409	6,650,054	69,473,026	68,699,320	11,316	7,853	6,169	7,338	27,068
Kentucky	14,650,553	29,931,119	9,038,503	0	37,403,540	6,014	3,409	4,854	-	36,349
Louisiana	2,614,025	965,585	8,641,823	1,493,049	0	5,176	781	4,828	14,220	-
Maine	19,513,397	1,651,790	85,616	4,904,345	39,277,635	12,704	2,330	6,586	1,875	9,881
Maryland	40,505,368	174,916,083	7,213,312	21,504,345	0	10,727	28,802	8,712	6,135	-
Massachusetts	91,541,275	92,508,084	15,035,755	2,419,961	381,543,465	10,471	6,500	7,229	815	38,917
Michigan	0	674,010	350,024	0	21,941,372	-	2,269	6,250	-	6,948
Minnesota*	71,560,192	26,002,634	3,949,545	109,593,772	4,314,112	12,080	1,570	7,509	11,479	10,446
Mississippi	1,717,585	8,999,984	6,816,943	20,082	278,936	5,943	1,819	9,865	1,116	3,065
Missouri	4,612,998	496,107	916,986	143,886,967	74,893,427	3,970	2,851	6,368	4,268	14,386
Montana	1,261,342	246,496	324,260	15,251,820	6,896,978	2,134	1,786	4,442	7,672	13,933
Nebraska	2,282,295	9,547,425	4,087,387	5,164,246	2,190,451	3,693	6,035	6,317	5,559	11,119
Nevada	0	1,112,893	2,889,042	12,497,083	0	-	4,903	6,798	5,853	-
New Hampshire	20,893,757	792,889	0	3,956,424	4,784,091	15,639	1,701	-	30,910	14,675
New Jersey	60,771,844	41,889,315	18,747,332	170,350,561	31,259,493	7,332	6,768	7,995	10,591	13,234
New Mexico	10,395,171	167,408	3,735,813	98,492,551	0	10,817	1,625	8,980	17,872	0
New York	649,984,292	631,774,170	33,691,541	1,607,030,533	1,162,946,206	18,716	6,195	8,666	19,802	65,677
North Carolina	1,313,185	31,998,037	14,666,213	102,788,373	38,338,190	4,497	1,762	7,433	3,127	30,893
North Dakota	44,831	1,281,492	1,032,392	0	834,624	3,736	3,110	5,405	-	13,248

TABLE A6.12

COMMUNITY-BASED LONG-TERM CARE EXPENDITURES (FFS ONLY) AMONG FFS DUALS

	Total Expenditures					Expenditures per User				
	Adult Day	HH	Hospice	Pers Care	Res Care	Adult Day	HH	Hospice	Pers Care	Res Care
Ohio	10,046,952	39,959,992	51,556,676	0	51,532	4,741	4,536	8,427	-	7,362
Oklahoma	54,802,114	341,505	0	36,233,483	77,085	29,448	289	-	3,541	1,573
Oregon*	1,158,910	71,124	304,876	2,973,260	48,630,552	3,800	900	6,222	520	9,399
Pennsylvania**	0	30,070,407	250,679	30,266,575	1,469,144	-	6,047	6,428	6,905	6,648
Rhode Island	23,672,576	14,274,116	1,035,212	3,958,127	266,439	10,056	7,568	3,877	3,329	44,407
South Carolina	27,794,454	1,891,062	704,186	58,014,526	73,171,927	6,511	1,292	7,412	4,417	32,506
South Dakota	13,073	32,338	163,466	5,142,321	31	1,634	1,702	4,302	3,259	31
Tennessee**	0	42,189	231,185	0	0	-	2,482	4,624	-	-
Texas	0	1,402,412	92,273,676	6,837,747	0	-	2,373	9,946	7,942	-
Utah**	1,805,983	809,474	3,267,819	602,024	5,646,489	6,893	3,150	7,951	1,936	20,683
Vermont	0	3,944,311	212,138	76,051	0	-	2,465	3,536	4,474	-
Virginia	30,923,458	482,607	717,808	76,678,134	101,221,024	10,850	1,117	4,377	9,334	21,386
Washington	56,335	503,303	6,968,471	5,609	0	4,024	1,314	5,131	312	-
West Virginia	17,236,161	583,283	1,210,186	630,862	32,384,406	13,636	268	6,613	215	29,847
Wisconsin	959,213	8,795,377	8,879,839	72,267,594	34,577,425	2,067	4,627	6,045	8,767	19,114
Wyoming	10,607,215	335,335	60,172	0	19,482,118	15,576	3,645	8,596	-	34,179

SOURCE: Medicaid Analytic Extract 2002.

**FFS duals represent less than 50 percent of all full-benefit duals in this state.

*FFS duals represent less than 75 percent of all full-benefit duals in this state.

- = not applicable; Adult Day = adult day care; FFS = fee-for-service; FFS duals = full-benefit duals who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; HH = home health; Pers Care = personal care; Res Care = residential care.

TABLE A6.13

PHYSICIAN AND OTHER AMBULATORY SERVICE UTILIZATION (FFS ONLY) AMONG FFS DUALS

	Number Using Service								Percentage Using Service							
	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab
United States	990,663	790,569	1,466,001	2,228,444	3,879,392	612,954	119,490	137,832	16.0	12.8	23.7	36.0	62.6	9.9	1.9	2.2
Alabama	22,863	233	24,097	49,884	78,427	11,441	228	26	21.9	0.2	23.1	47.8	75.1	11.0	0.2	0.0
Alaska	2,861	1,363	2,300	6,274	7,855	1,809	869	89	25.0	11.9	20.1	54.9	68.7	15.8	7.6	0.8
Arizona**	2,407	38	294	5,393	1,851	33	44	91	7.5	0.1	0.9	16.8	5.8	0.1	0.1	0.3
Arkansas	12,865	66	27,310	34,886	57,017	5,317	1,109	1	17.0	0.1	36.0	46.0	75.2	7.0	1.5	0.0
California	124,288	18	181,418	287,810	538,695	29,115	33,822	35,149	14.7	0.0	21.4	34.0	63.6	3.4	4.0	4.2
Colorado	33,645	4,015	7,584	17,112	15,888	5,470	241	0	70.2	8.4	15.8	35.7	33.2	11.4	0.5	0.0
Connecticut	9,797	25,392	30,270	33,618	47,905	13,637	2,331	17	12.5	32.4	38.6	42.9	61.1	17.4	3.0	0.0
Delaware	819	4	2,862	4,479	7,656	561	146	205	8.5	0.0	29.7	46.5	79.4	5.8	1.5	2.1
District of Columbia	1,645	350	2,979	1,319	2,909	1,318	0	0	9.6	2.1	17.5	7.7	17.0	7.7	0.0	0.0
Florida	47,252	27,526	58,637	125,555	165,268	12,985	7,855	0	13.0	7.5	16.1	34.4	45.3	3.6	2.2	0.0
Georgia	14,290	11,595	34,827	89,859	131,235	10,003	1,191	3,976	8.7	7.0	21.1	54.5	79.7	6.1	0.7	2.4
Hawaii	5,370	1,951	4,336	5,398	21,554	2,974	1,025	14	20.6	7.5	16.6	20.7	82.6	11.4	3.9	0.1
Idaho	5,315	3,913	7,046	9,000	15,685	2,693	1,999	1,227	26.2	19.3	34.8	44.4	77.4	13.3	9.9	6.1
Illinois	25,460	29,530	65,489	90,066	162,205	14,698	5,520	10,017	7.1	8.2	18.2	25.1	45.1	4.1	1.5	2.8
Indiana	44,437	29,010	54,922	49,164	78,060	9,697	11,656	11,667	38.5	25.1	47.6	42.6	67.7	8.4	10.1	10.1
Iowa	7,975	19,194	25,915	29,947	41,850	11,845	2,415	194	13.3	32.1	43.3	50.1	70.0	19.8	4.0	0.3
Kansas*	8,715	765	6,396	13,234	24,542	3,698	867	279	25.5	2.2	18.7	38.7	71.8	10.8	2.5	0.8
Kentucky	22,250	13,380	31,454	55,366	82,391	5,681	634	287	22.4	13.5	31.7	55.8	83.0	5.7	0.6	0.3
Louisiana	13,378	3,810	15,413	5,170	91,808	8,302	1,686	1,773	11.8	3.4	13.6	4.6	81.1	7.3	1.5	1.6
Maine	14,441	4,466	15,884	6,410	36,856	4,485	1,005	311	15.9	4.9	17.5	7.1	40.6	4.9	1.1	0.3
Maryland	4,737	122	15,130	23,422	49,086	10,984	4,766	5	6.0	0.2	19.2	29.7	62.2	13.9	6.0	0.0
Massachusetts	19,915	45,684	56,065	116,318	145,427	59,517	5,154	2,297	9.8	22.4	27.5	57.2	71.5	29.2	2.5	1.1
Michigan	2,116	48,030	27,110	60,719	94,835	3,423	5	28	1.1	25.0	14.1	31.7	49.5	1.8	0.0	0.0
Minnesota*	5,457	23,950	23,821	30,396	47,857	15,913	6,050	6,444	6.9	30.3	30.1	38.4	60.5	20.1	7.6	8.1
Mississippi	46,065	14,580	27,119	86,406	121,760	17,923	736	0	31.7	10.0	18.7	59.5	83.8	12.3	0.5	0.0
Missouri	109,106	21,308	46,090	85,373	88,040	7,959	1,827	9,372	70.5	13.8	29.8	55.2	56.9	5.1	1.2	6.1
Montana	3,130	4,513	6,510	6,560	12,983	2,182	594	0	18.1	26.1	37.7	38.0	75.1	12.6	3.4	0.0
Nebraska	6,361	12,732	18,900	15,463	25,796	6,724	916	894	17.8	35.5	52.7	43.2	72.0	18.8	2.6	2.5
Nevada	2,400	4,063	3,594	7,306	4	1,415	599	455	12.2	20.6	18.3	37.1	0.0	7.2	3.0	2.3
New Hampshire	6,482	834	3,209	10,371	11,833	4,567	300	232	31.9	4.1	15.8	51.0	58.2	22.4	1.5	1.1
New Jersey	7,366	40,921	12,354	53,687	70,245	8,381	0	422	4.9	27.4	8.3	35.9	47.0	5.6	0.0	0.3
New Mexico	6,277	7,926	8,776	9,154	22,520	4,104	754	132	19.9	25.2	27.9	29.1	71.5	13.0	2.4	0.4
New York	90,905	142,050	168,638	260,197	404,186	127,373	7,318	17,000	15.2	23.8	28.3	43.6	67.8	21.4	1.2	2.8
North Carolina	57,800	58,709	75,069	127,403	209,327	23,465	652	0	23.3	23.7	30.3	51.4	84.5	9.5	0.3	0.0
North Dakota	2,085	4,515	3,509	5,434	76	123	414	0	15.2	32.8	25.5	39.5	0.6	0.9	3.0	0.0
Ohio	23,394	64,622	95,261	116,713	177,357	31,542	1,935	22,851	10.7	29.7	43.8	53.6	81.5	14.5	0.9	10.5
Oklahoma	12,930	1,937	4,282	18,449	56,879	10,705	825	0	14.6	2.2	4.8	20.8	64.3	12.1	0.9	0.0
Oregon*	2,390	180	4,252	13,535	20,487	4,774	696	477	5.7	0.4	10.1	32.2	48.8	11.4	1.7	1.1
Pennsylvania**	7,460	17,773	19,971	8,464	61,987	11,434	5	2	5.3	12.6	14.1	6.0	43.9	8.1	0.0	0.0
Rhode Island	2,645	8,557	10,248	13,411	20,006	2,317	0	3,249	8.6	27.9	33.4	43.8	65.3	7.6	0.0	10.6
South Carolina	29,000	11,335	19,512	35,902	77,310	13,730	41	201	23.0	9.0	15.5	28.5	61.4	10.9	0.0	0.2
South Dakota	4,020	11	6,420	5,851	10,056	1,199	642	197	28.5	0.1	45.6	41.5	71.4	8.5	4.6	1.4
Tennessee**	144	34	874	143	2,682	452	0	28	1.6	0.4	9.4	1.5	28.9	4.9	0.0	0.3

TABLE A6.13

PHYSICIAN AND OTHER AMBULATORY SERVICE UTILIZATION (FFS ONLY) AMONG FFS DUALS

	Number Using Service								Percentage Using Service							
	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab
Texas	3,126	3,950	111,581	7,204	295,035	54,380	3,941	98	0.8	1.0	29.3	1.9	77.3	14.3	1.0	0.0
Utah**	1,201	1,834	3,974	2,335	7,008	1,036	845	241	11.4	17.4	37.6	22.1	66.3	9.8	8.0	2.3
Vermont	3,383	4,677	4,620	10,439	15,143	1,952	332	4	11.1	15.3	15.1	34.1	49.5	6.4	1.1	0.0
Virginia	17,459	195	17,182	57,342	78,972	7,215	58	2,249	16.2	0.2	15.9	53.2	73.3	6.7	0.1	2.1
Washington	7,834	30,868	22,160	35,185	54,974	2,461	1,099	541	7.2	28.3	20.3	32.3	50.4	2.3	1.0	0.5
West Virginia	11,327	3,271	13,316	21,915	36,898	10,034	1,096	2,415	23.1	6.7	27.1	44.6	75.1	20.4	2.2	4.9
Wisconsin	72,950	34,472	35,733	60,584	46,143	8,817	3,138	2,217	41.7	19.7	20.4	34.7	26.4	5.0	1.8	1.3
Wyoming	1,125	297	1,288	2,819	4,823	1,091	109	458	17.2	4.6	19.7	43.2	73.9	16.7	1.7	7.0

SOURCE: Medicaid Analytic Extract 2002.

**FFS duals represent less than 50 percent of all full-benefit duals in this state.

*FFS duals represent less than 75 percent of all full-benefit duals in this state.

FFS = fee-for-service; FFS duals = full-benefit duals who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; Psych = psychiatric; PT/OT = physical therapy/occupational therapy; Rehab = rehabilitation.

TABLE A6.14

PHYSICIAN AND OTHER AMBULATORY SERVICE EXPENDITURES (FFS ONLY) AMONG FFS DUALS

	Total Expenditures								Expenditures per User							
	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab
United States	**689,355,144**	**258,597,515**	**95,987,396**	**1,112,085,362**	**1,105,809,881**	**1,373,350,795**	**34,410,586**	**563,642,321**	**696**	**327**	**65**	**499**	**285**	**2,241**	**288**	**4,089**
Alabama	26,841,818	83,466	1,498,644	51,370,890	34,252,626	39,988,129	209,592	22,166	1,174	358	62	1,030	437	3,495	919	853
Alaska	2,119,617	571,962	211,073	3,540,888	3,394,953	8,609,751	383,673	180,324	741	420	92	564	432	4,759	442	2,026
Arizona**	1,063,900	8,767	19,028	16,465,126	657,667	37,791	14,190	35,496	442	231	65	3,053	355	1,145	323	390
Arkansas	15,722,156	19,968	2,942,641	14,096,226	47,676,359	33,757,955	642,449	4,176	1,222	303	108	404	836	6,349	579	4,176
California	113,576,450	1,077	13,422,957	64,499,450	78,101,399	98,715,397	12,435,612	78,594,388	914	60	74	224	145	3,391	368	2,236
Colorado	13,547,824	1,109,973	744,028	4,614,356	1,882,061	2,103,436	65,652	0	403	276	98	270	118	385	272	-
Connecticut	8,858,389	4,499,430	1,149,379	10,692,682	6,178,356	6,648,744	193,257	12,650	904	177	38	318	129	488	83	744
Delaware	1,459,199	2,130	187,217	2,111,145	3,348,935	4,594,489	71,409	1,238,852	1,782	533	65	471	437	8,190	489	6,043
District of Columbia	2,867,885	42,570	174,071	572,107	775,562	4,057,336	0	0	1,743	122	58	434	267	3,078	-	-
Florida	17,075,841	7,426,656	2,443,366	26,445,503	21,183,784	10,786,766	1,081,150	0	361	270	42	211	128	831	138	-
Georgia	4,080,607	3,446,098	1,961,028	44,232,081	50,891,780	13,988,785	269,253	131,742	286	297	56	492	388	1,398	226	33
Hawaii	2,478,859	397,736	268,151	2,377,265	7,881,585	1,246,080	163,344	715	462	204	62	440	366	419	159	51
Idaho	2,712,115	1,393,491	676,319	21,576,774	6,299,572	10,973,529	1,029,345	491,640	510	356	96	2,397	402	4,075	515	401
Illinois	9,643,289	8,585,327	3,031,082	56,218,917	61,287,328	18,437,497	960,341	34,758,946	379	291	46	624	378	1,254	174	3,470
Indiana	8,473,094	14,394,505	8,422,029	24,607,597	21,582,649	29,477,566	385,277	49,436,274	191	496	153	501	276	3,040	33	4,237
Iowa	1,735,236	5,874,107	1,811,260	16,324,095	12,636,268	3,214,689	193,210	48,595	218	306	70	545	302	271	80	250
Kansas*	1,967,856	204,980	341,056	2,746,144	7,322,935	15,012,434	189,737	372,260	226	268	53	208	298	4,060	219	1,334
Kentucky	15,324,132	3,331,367	1,633,858	25,159,760	32,384,741	3,651,915	142,648	97,653	689	249	52	454	393	643	225	340
Louisiana	8,030,734	2,683,314	724,956	3,019,713	30,940,584	4,932,040	86,753	684,176	600	704	47	584	337	594	51	386
Maine	10,892,553	1,511,150	1,555,498	7,625,328	11,484,712	27,377,675	354,835	9,593,131	754	338	98	1,190	312	6,104	353	30,846
Maryland	695,540	9,159	696,678	9,162,030	18,062,674	39,335,223	1,135,919	494	147	75	46	391	368	3,581	238	99
Massachusetts	17,181,943	14,955,731	2,713,445	60,073,101	39,870,143	70,044,834	1,507,543	1,574,343	863	327	48	516	274	1,177	292	685
Michigan	843,619	8,554,813	1,062,721	70,964,727	7,860,324	178,289	157	459	399	178	39	1,169	83	52	31	16
Minnesota*	3,816,950	7,042,580	3,564,576	10,299,903	22,154,818	277,225,734	2,481,843	85,101,028	699	294	150	339	463	17,421	410	13,206
Mississippi	9,085,168	2,860,635	1,292,515	39,304,289	28,373,597	23,234,473	75,270	0	197	196	48	455	233	1,296	102	-
Missouri	43,177,201	5,934,643	2,023,277	46,861,689	17,522,202	8,345,400	165,776	25,717,542	396	279	44	549	199	1,049	91	2,744
Montana	1,574,541	1,647,866	704,586	2,260,143	3,360,712	5,688,830	142,296	0	503	365	108	345	259	2,607	240	-
Nebraska	825,041	3,634,705	2,824,536	8,060,572	8,458,862	4,040,752	1,948,515	1,936,928	130	285	149	521	328	601	2,127	2,167
Nevada	3,609,974	2,677,267	266,301	2,599,697	312	184,356	58,411	3,188,672	1,504	659	74	356	78	130	98	7,008
New Hampshire	10,966,744	153,865	158,765	7,638,482	2,243,781	26,825,998	79,142	410,243	1,692	184	49	737	190	5,874	264	1,768
New Jersey	3,458,466	11,140,594	328,919	51,693,448	5,219,260	42,704,570	0	3,679,570	470	272	27	963	74	5,095	-	8,719
New Mexico	2,064,938	4,124,342	633,215	2,140,083	6,340,773	5,558,246	211,251	8,799	329	520	72	234	282	1,354	280	67
New York	148,666,007	75,546,609	9,193,069	132,981,610	129,016,836	211,899,301	1,383,377	80,156,897	1,635	532	55	511	319	1,664	189	4,715
North Carolina	52,807,862	17,837,076	4,226,040	50,473,099	67,589,902	28,341,711	125,406	0	914	304	56	396	323	1,208	192	-
North Dakota	359,452	1,283,677	261,265	3,523,618	6,432	52,261	243,778	0	172	284	74	648	85	425	589	-
Ohio	26,560,248	16,332,734	6,549,425	62,343,166	75,276,176	79,887,434	808,971	155,528,356	1,135	253	69	534	424	2,533	418	6,806
Oklahoma	16,395,757	591,480	183,782	3,173,965	7,960,635	10,614,545	1,630,351	0	1,268	305	43	172	140	992	1,976	-
Oregon*	1,146,097	35,719	342,122	23,989,822	3,652,359	18,254,440	228,739	197,951	480	198	80	1,772	178	3,824	329	415
Pennsylvania**	3,007,021	2,931,674	466,068	1,457,162	4,853,734	18,030,653	546	134	403	165	23	172	78	1,577	109	67
Rhode Island	904,671	1,718,259	475,425	3,081,875	4,313,592	11,428,721	0	23,097,301	342	201	46	230	216	4,933	-	7,109
South Carolina	26,816,216	3,404,715	644,333	8,796,278	15,249,831	40,411,175	3,073	694,591	925	300	33	245	197	2,943	75	3,456
South Dakota	2,502,159	437	699,735	3,162,190	2,880,456	2,706,927	188,742	1,117,912	622	40	109	540	286	2,258	294	5,675
Tennessee**	21,800	9,369	43,787	100,052	250,559	51,041	0	4,035	151	276	50	700	93	113	-	144
Texas	773,801	1,020,190	6,348,680	4,841,868	142,950,529	39,094,417	1,542,729	820,172	248	258	57	672	485	719	391	8,369
Utah**	1,089,276	553,844	247,400	1,300,060	1,546,197	229,323	158,112	120,352	907	302	62	557	221	221	187	499

TABLE A6.14

PHYSICIAN AND OTHER AMBULATORY SERVICE EXPENDITURES (FFS ONLY) AMONG FFS DUALS

	Total Expenditures								Expenditures per User							
	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab	Clinic	Dental	Other	Outpatient Hospital	Physician	Psych Services	PT/OT	Rehab
Vermont	692,482	1,259,465	998,836	6,152,290	5,210,680	2,858,685	89,903	16,443	205	269	216	589	344	1,464	271	4,111
Virginia	12,116,102	73,227	843,949	28,141,213	13,004,699	26,818,668	2,081	1,091,682	694	376	49	491	165	3,717	36	485
Washington	10,275,114	10,524,926	2,033,592	26,938,339	15,869,183	635,980	249,743	122,363	1,312	341	92	766	289	258	227	226
West Virginia	6,342,370	712,869	625,188	14,295,417	9,061,887	23,178,600	163,478	1,209,875	560	218	47	652	246	2,310	149	501
Wisconsin	12,663,990	6,382,449	2,265,071	26,550,972	6,058,364	16,295,919	909,177	1,927,384	174	185	63	438	131	1,848	290	869
Wyoming	443,040	54,522	52,454	1,428,155	1,426,516	1,582,285	4,530	215,611	394	184	41	507	296	1,450	42	471

SOURCE: Medicaid Analytic Extract 2002.

**FFS duals represent less than 50 percent of all full-benefit duals in this state.

*FFS duals represent less than 75 percent of all full-benefit duals in this state.

- = not applicable; FFS = fee-for-service; FFS duals = full-benefit duals who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002; Psych = psychiatric; PT/OT = physical therapy/occupational therapy; Rehab = rehabilitation.

TABLE A6.15

LAB/X-RAY, SUPPLIES, AND OTHER WRAPAROUND SERVICE UTILIZATION (FFS ONLY) AMONG FFS DUALS

	Number Using Service					Percentage Using Service				
	DME	Lab/ X-ray	Other Services	Targeted Case Management	Trans-portation	DME	Lab/ X-ray	Other Services	Targeted Case Management	Trans-portation
United States	**1,987,281**	**2,289,536**	**1,497,624**	**261,451**	**1,285,712**	**32.1**	**37.0**	**24.2**	**4.2**	**20.8**
Alabama	35,556	63,418	12,709	9,920	17,477	34.1	60.7	12.2	9.5	16.7
Alaska	5,718	6,102	1,382	2,309	3,840	50.0	53.4	12.1	20.2	33.6
Arizona**	1,833	2,836	4,152	0	2,734	5.7	8.9	13.0	0.0	8.5
Arkansas	21,337	37,514	32,969	6,059	47,408	28.2	49.5	43.5	8.0	62.5
California	319,908	86,854	152,060	60,823	125,549	37.8	10.3	18.0	7.2	14.8
Colorado	23,722	27,666	12,456	0	11,801	49.5	57.8	26.0	0.0	24.6
Connecticut	37,564	43,776	9,132	4,782	20,397	47.9	55.9	11.7	6.1	26.0
Delaware	1,198	5,077	3,209	0	3,626	12.4	52.7	33.3	0.0	37.6
District of Columbia	6,736	7,629	10,282	123	4,521	39.5	44.7	60.2	0.7	26.5
Florida	108,706	112,141	96,762	9,546	99,501	29.8	30.8	26.5	2.6	27.3
Georgia	18,438	21,212	40,541	2,177	27,951	11.2	12.9	24.6	1.3	17.0
Hawaii	8,614	13,824	6,446	644	3,535	33.0	53.0	24.7	2.5	13.5
Idaho	6,229	10,471	5,942	1,532	5,163	30.7	51.7	29.3	7.6	25.5
Illinois	56,670	123,003	59,753	189	64,850	15.8	34.2	16.6	0.1	18.0
Indiana	43,217	67,993	43,460	348	36,514	37.5	58.9	37.7	0.3	31.7
Iowa	27,073	32,960	16,502	4,828	5,748	45.3	55.1	27.6	8.1	9.6
Kansas*	6,324	14,890	6,118	8,095	6,270	18.5	43.6	17.9	23.7	18.3
Kentucky	16,040	18,589	37,876	1,178	26,765	16.2	18.7	38.1	1.2	27.0
Louisiana	35,139	70,067	4,292	1,757	32,684	31.0	61.9	3.8	1.6	28.9
Maine	13,171	6,547	12,515	6,102	15,025	14.5	7.2	13.8	6.7	16.6
Maryland	16,864	38,884	7,402	1,185	9,448	21.4	49.3	9.4	1.5	12.0
Massachusetts	79,958	114,260	19,431	10,478	55,997	39.3	56.1	9.5	5.1	27.5
Michigan	64,953	17,040	22,164	33,958	6,138	33.9	8.9	11.6	17.7	3.2
Minnesota*	27,939	26,772	17,686	18,326	16,581	35.3	33.9	22.4	23.2	21.0
Mississippi	65,067	94,014	20,856	0	28,400	44.8	64.7	14.4	0.0	19.6
Missouri	27,080	51,761	54,068	10,812	23,905	17.5	33.5	34.9	7.0	15.4
Montana	7,356	6,408	5,784	1,260	2,716	42.6	37.1	33.5	7.3	15.7
Nebraska	19,820	16,804	16,464	2,084	372	55.3	46.9	45.9	5.8	1.0
Nevada	2,085	15,496	6,471	2,808	2,439	10.6	78.7	32.9	14.3	12.4
New Hampshire	6,166	10,161	5,356	901	2,929	30.3	49.9	26.3	4.4	14.4
New Jersey	49,672	52,249	40,328	30	32,778	33.2	34.9	27.0	0.0	21.9
New Mexico	12,677	18,050	8,507	867	7,979	40.3	57.3	27.0	2.8	25.3
New York	222,334	293,503	225,954	9	191,527	37.3	49.2	37.9	0.0	32.1
North Carolina	88,263	161,526	84,174	13,745	58,762	35.6	65.2	34.0	5.5	23.7

TABLE A6.15

LAB/X-RAY, SUPPLIES, AND OTHER WRAPAROUND SERVICE UTILIZATION (FFS ONLY) AMONG FFS DUALS

	Number Using Service					Percentage Using Service				
	DME	Lab/ X-ray	Other Services	Targeted Case Management	Trans-portation	DME	Lab/ X-ray	Other Services	Targeted Case Management	Trans-portation
North Dakota	4,409	3,326	9,552	1,225	2,674	32.1	24.2	69.5	8.9	19.4
Ohio	84,984	48,689	85,927	3,819	67,682	39.0	22.4	39.5	1.8	31.1
Oklahoma	25,825	27,596	27,173	6,832	6,877	29.2	31.2	30.7	7.7	7.8
Oregon*	18,518	17,431	14,749	67	13,263	44.1	41.5	35.1	0.2	31.6
Pennsylvania**	11,197	47,861	33,570	945	2,524	7.9	33.9	23.8	0.7	1.8
Rhode Island	6,773	14,861	6,686	681	4,719	22.1	48.5	21.8	2.2	15.4
South Carolina	34,531	51,319	1,566	6,960	16,985	27.4	40.7	1.2	5.5	13.5
South Dakota	2,859	6,689	3,705	0	3,120	20.3	47.5	26.3	0.0	22.2
Tennessee**	1,149	2,401	323	0	918	12.4	25.9	3.5	0.0	9.9
Texas	169,948	236,154	90,000	17,209	86,040	44.6	61.9	23.6	4.5	22.6
Utah**	3,898	4,764	852	10	1,272	36.9	45.1	8.1	0.1	12.0
Vermont	4,561	2,413	4,793	1	5,693	14.9	7.9	15.7	0.0	18.6
Virginia	28,335	25,751	36,984	51	17,419	26.3	23.9	34.3	0.0	16.2
Washington	45,952	14,942	23,647	0	4,498	42.2	13.7	21.7	0.0	4.1
West Virginia	13,707	27,319	7,485	54	15,263	27.9	55.6	15.2	0.1	31.1
Wisconsin	44,755	64,806	45,355	6,395	34,669	25.6	37.1	26.0	3.7	19.8
Wyoming	2,453	3,717	2,054	327	766	37.6	57.0	31.5	5.0	11.7

SOURCE: Medicaid Analytic Extract 2002.

**FFS duals represent less than 50 percent of all full-benefit duals in this state.

*FFS duals represent less than 75 percent of all full-benefit duals in this state.

DME = durable medical equipment; FFS = fee-for-service; FFS duals = full-benefit duals who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002.

TABLE A6.16

LAB/X-RAY, SUPPLIES, AND OTHER WRAPAROUND SERVICE EXPENDITURES (FFS ONLY) AMONG FFS DUALS

	Total Expenditures					Expenditures per User				
	DME	Lab/X-ray	Other Services	Targeted Case Management	Trans-portation	DME	Lab/X-ray	Other Services	Targeted Case Management	Trans-portation
United States	**928,563,061**	**412,418,194**	**5,095,702,952**	**355,648,466**	**698,805,171**	**467**	**180**	**3,403**	**1,360**	**544**
Alabama	20,869,023	66,688,024	26,325,590	16,928,143	6,525,772	587	1,052	2,071	1,706	373
Alaska	4,618,849	1,157,483	3,282,542	4,202,711	6,527,289	808	190	2,375	1,820	1,700
Arizona**	2,447,371	2,823,906	2,059,944	0	5,375,782	1,335	996	496	-	1,966
Arkansas	9,869,429	8,442,874	62,262,587	236,922	2,482,699	463	225	1,889	39	52
California	117,880,416	14,614,891	86,106,047	82,800,603	87,237,110	368	168	566	1,361	695
Colorado	21,117,391	4,741,106	171,674,211	0	5,046,344	890	171	13,782	-	428
Connecticut	10,215,872	8,459,487	34,503,786	9,101,916	6,008,413	272	193	3,778	1,903	295
Delaware	568,933	510,578	29,262,430	0	2,038,189	475	101	9,119	-	562
District of Columbia	6,532,940	12,387,850	26,508,418	54,725	6,333,795	970	1,624	2,578	445	1,401
Florida	39,077,717	10,708,528	209,643,060	14,497,697	46,947,624	359	95	2,167	1,519	472
Georgia	8,572,146	6,318,484	87,217,855	2,407,171	4,550,646	465	298	2,151	1,106	163
Hawaii	3,060,689	1,220,554	26,177,605	5,646,736	1,788,375	355	88	4,061	8,768	506
Idaho	2,541,930	1,130,973	33,327,058	2,121,983	4,861,094	408	108	5,609	1,385	942
Illinois	21,895,326	18,469,690	311,492,423	33,312	33,322,147	386	150	5,213	176	514
Indiana	26,478,772	13,707,679	59,803,838	130,619	17,390,535	613	202	1,376	375	476
Iowa	9,662,002	3,139,248	42,734,840	9,910,766	768,343	357	95	2,590	2,053	134
Kansas*	2,416,741	1,181,178	1,744,190	9,911,869	3,570,217	382	79	285	1,224	569
Kentucky	10,315,573	3,911,158	78,325,403	2,162,304	9,220,702	643	210	2,068	1,836	345
Louisiana	29,972,329	9,154,140	64,954,760	3,044,620	12,020,485	853	131	15,134	1,733	368
Maine	48,058,131	2,060,457	98,271,626	15,159,875	8,953,733	3,649	315	7,852	2,484	596
Maryland	8,230,062	7,204,142	8,334,575	332,901	1,398,417	488	185	1,126	281	148
Massachusetts	23,867,224	13,685,805	150,931,232	19,368,800	45,578,581	298	120	7,768	1,849	814
Michigan	57,009,712	581,235	5,652,758	21,733,458	497,460	878	34	255	640	81
Minnesota*	12,468,223	5,607,101	18,034,673	26,600,160	18,045,707	446	209	1,020	1,451	1,088
Mississippi	16,338,796	4,395,560	67,778,560	0	24,215,006	251	47	3,250	-	853
Missouri	20,333,084	7,111,363	182,913,024	16,573,306	4,317,751	751	137	3,383	1,533	181
Montana	3,337,398	1,276,643	10,292,871	1,857,133	534,188	454	199	1,780	1,474	197
Nebraska	11,090,333	3,859,252	75,514,247	3,725,688	114,250	560	230	4,587	1,788	307
Nevada	82,937	8,144,760	22,432,991	6,313,588	1,202,962	40	526	3,467	2,248	493
New Hampshire	2,372,366	1,291,620	80,910,206	1,287,611	2,298,367	385	127	15,106	1,429	785
New Jersey	23,955,126	14,487,482	240,160,607	43,752	33,659,482	482	277	5,955	1,458	1,027
New Mexico	9,249,772	1,624,746	96,716,550	1,271,430	6,949,715	730	90	11,369	1,466	871
New York	77,211,063	38,134,447	233,282,475	13,002	166,115,566	347	130	1,032	1,445	867
North Carolina	28,971,806	24,075,687	357,278,190	24,729,217	10,220,264	328	149	4,245	1,799	174

TABLE A6.16

LAB/X-RAY, SUPPLIES, AND OTHER WRAPAROUND SERVICE EXPENDITURES (FFS ONLY) AMONG FFS DUALS

	Total Expenditures					Expenditures per User				
	DME	Lab/X-ray	Other Services	Targeted Case Management	Trans-portation	DME	Lab/X-ray	Other Services	Targeted Case Management	Trans-portation
North Dakota	779,708	391,492	42,141,309	1,017,032	761,343	177	118	4,412	830	285
Ohio	30,558,616	11,248,055	487,454,402	4,276,907	33,122,310	360	231	5,673	1,120	489
Oklahoma	14,385,585	1,487,306	102,136,529	8,463,220	2,218,333	557	54	3,759	1,239	323
Oregon*	14,160,637	18,675,472	74,666,058	37,931	7,194,172	765	1,071	5,062	566	542
Pennsylvania**	8,462,516	2,339,814	46,060,459	643,048	376,473	756	49	1,372	680	149
Rhode Island	2,874,873	1,786,130	2,111,157	599,808	1,107,426	424	120	316	881	235
South Carolina	12,386,444	7,155,756	602,927	11,129,901	7,591,799	359	139	385	1,599	447
South Dakota	492,137	571,694	40,570,431	0	865,544	172	85	10,950	-	277
Tennessee**	196,498	90,856	145,406	0	150,595	171	38	450	-	164
Texas	77,813,582	30,114,066	896,926,959	24,084,827	28,640,384	458	128	9,966	1,400	333
Utah**	2,283,226	1,615,585	3,170,492	2,167	248,784	586	339	3,721	217	196
Vermont	1,324,569	676,176	78,768,752	484	2,840,298	290	280	16,434	484	499
Virginia	14,517,040	1,399,586	28,081,424	5,108	2,909,560	512	54	759	100	167
Washington	34,165,342	3,666,861	15,481,502	0	1,046,946	744	245	655	-	233
West Virginia	5,090,274	3,422,162	58,624,409	21,361	9,435,884	371	125	7,832	396	618
Wisconsin	17,129,973	4,737,034	202,740,411	2,848,247	14,063,675	383	73	4,470	445	406
Wyoming	1,252,559	732,018	10,109,153	316,407	114,635	511	197	4,922	968	150

SOURCE: Medicaid Analytic Extract 2002.

**FFS duals represent less than 50 percent of all full-benefit duals in this state.

*FFS duals represent less than 75 percent of all full-benefit duals in this state.

- = not applicable; DME = durable medical equipment; FFS = fee-for-service; FFS duals = full-benefit duals who never enrolled in comprehensive Medicaid managed care plans (HMOs/HIOs) in 2002.

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